

**MOTHERS OVERCOMING BARRIERS OF POVERTY:
THE SIGNIFICANCE OF A RELATIONSHIP WITH
A CREDENTIALLED COACH**

A Dissertation

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MOTHERS OVERCOMING BARRIERS OF POVERTY: THE SIGNIFICANCE OF A RELATIONSHIP WITH A CREDENTIALLED COACH

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This study examined how 25 randomly selected rural and urban mothers living in poverty in the United States and their 10 Cornell-credentialed workers (“coaches”) used healthy mother-coach relationships grounded in the Family Development Credential (FDC) process to identify, address, and resolve societal and personal barriers to family self-reliance. The study looked at (1) barriers mothers encountered and the methods used to overcome them, (2) how mothers and workers perceived the meaning and significance of their relationship, and (3) aspects of this relationship that empowered mothers to pursue goals for a better life. Data from separate mother/coach interviews were developed into “practitioner profiles,” then combined into “profile pairs,” using a new methodological approach emerging from this study.

Initially, mothers’ ability to set and pursue goals was limited by personal and environmental factors, including chaos. The study found that the mother-coach relationship appeared to reduce these barriers. One mechanism for this appears to have been supportive, critically reflective dialogue between mothers and coaches, which appears to have been associated with mothers’ goal-oriented transformative learning. Recommendations include updates of the FDC curriculum, including new sections on chaos and transformative learning, as well as more explicit critical reflection tools. Development of a funding proposal to investigate the effectiveness of such tools is also recommended.

BIOGRAPHICAL SKETCH

Claire Forest came to Cornell University in 1981 to serve as Dissemination Director of the Ecology of Human Development (“Family Matters”) research project headed by Professor Urie Bronfenbrenner. Prior to arriving at Cornell, she had directed a family resource center and earned a master’s degree in adult education from Elmira College (where she also taught early childhood education courses). During her decade with Cornell Family Matters, she forged policy collaborations with New York State, which blossomed into the Cornell Family Development Credential (FDC). The Family Development Credential trains and credentials family workers from a range of agencies to use a strengths-based approach to help families set and pursue their own goals, and to foster community supports for families. Forest has served as director of the Family Development Credential since its inception in 1984. She has also been active nationally in family policy issues, both in collaborating with organizations in 23 states to implement programs affiliated with the Cornell Family Development Credential, and serving on the National Council on Family Relations’ Policy Committee.

Forest was trained since birth in the ancestral Celtic art of narrative by her mother, a renowned storyteller, who often used stories to raise community awareness and foster individual and community action about societal issues. Entering Cornell University’s graduate program in 2004 to study narrative research and adult education expanded this circle. Forest is the mother of two children, and is active in community education and land-use issues.

ACKNOWLEDGMENTS

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In appreciation, Claire Forest, Ph.D.

Ithaca, NY, August 2009.

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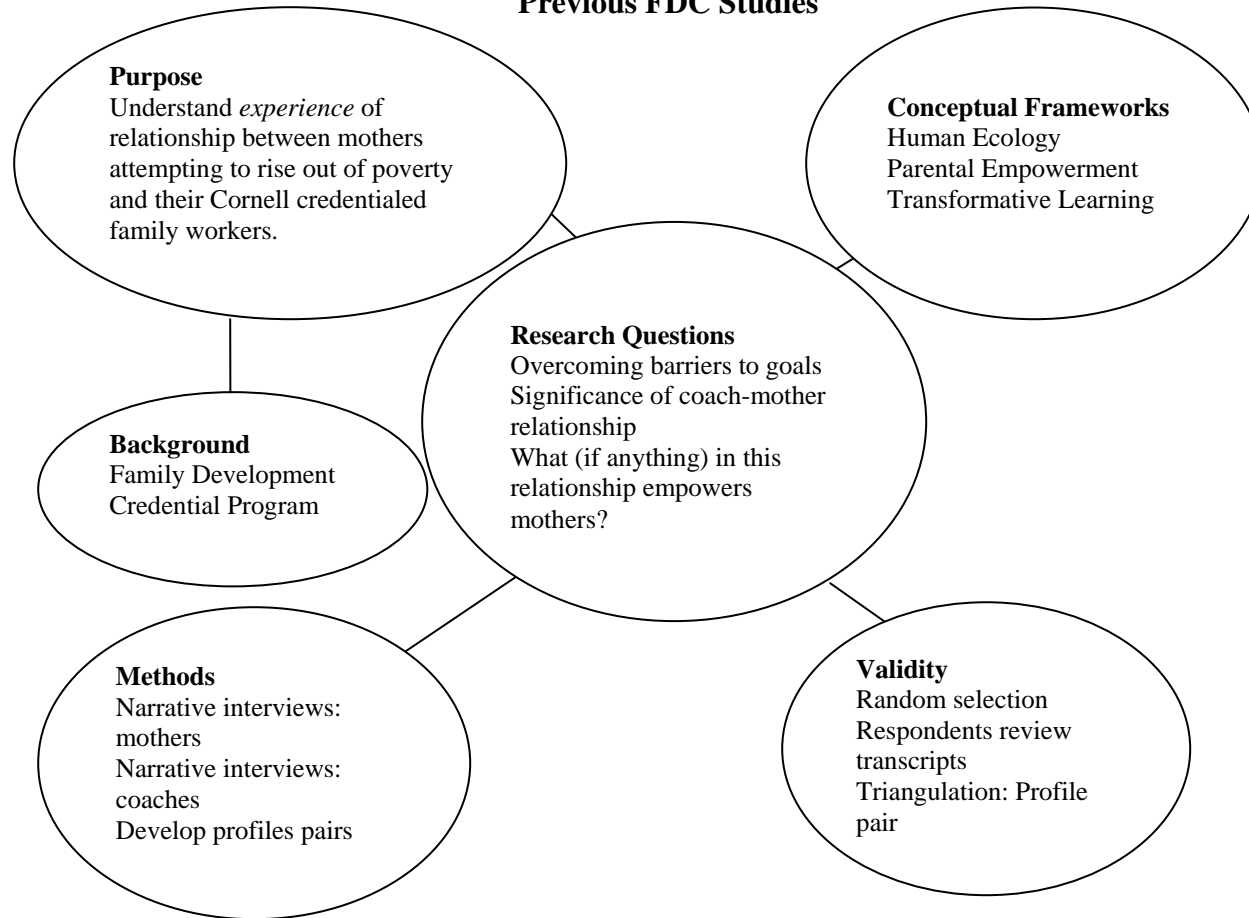
Chapter 1: Introduction to the Study and Research Design

An Interactive Model of Research Design

Figure 1 illustrates the study's interactive research design, including purposes, research questions, conceptual context within existing literature, a discussion of methods, validity issues, and background on the Family Development Credential program. Each topic is addressed in depth in the sections following Figure 1.

Figure 1: An Interactive Model of Research Design (adapted from Maxwell, 2005)

Previous FDC Studies



Purpose of the Study

The purpose of this study was to explore how mothers attempting to rise out of poverty and their Cornell-credentialed family workers experience their relationship, so as to better understand how personal and societal barriers are identified, addressed, and resolved in the course of fostering these families' healthy self-reliance. This qualitative study examined mothers' and workers' perceptions of the family development process.

Despite a growing body of empirical literature on the Family Development Credential (FDC) program conducted by various scholars (reviewed in Chapter 4), not enough is known about what occurs in the relationship between mothers and their credentialed coaches or the meaning they each ascribe to their work together. We know what the FDC textbook recommends, but not how mothers and workers perceive their experience. Adult education programs often promote didactic learning to teach a set of skills for individual development, or what Finger and Asun (2001) called "instrumental learning" or "learning for earning" (p. 130). According to these authors, the field of adult education employs instrumental learning to improve adult's "chances to participate in the labour market" (p. 130). Improved ability to get and keep a job is Welfare Reform's major goal for mothers such as those in this study, and previous studies (Danziger, 2005) identified barriers to reaching that goal. However, we still do not know enough about the experience of mothers and coaches in the FDC program.

To address this lack of knowledge, this study explored the *experience* of the relationship between FDC family workers and the families they coach. Understanding what happens in this relationship, and how mothers and coaches each understand what

happens, offers valuable clues into how the Family Development relationship might help mothers move out of poverty and sustain their development.

A fuller understanding of this experience would shed light not only on the individual interpretations of the experiences between these adults, but also on current societal issues. John Dewey (1968) noted that personal experience is also imbued with society's influences. The personal experiences of mothers living in poverty appear to be constrained by societal limitations. Their experiences with the credentialed workers who coach them may help these mothers overcome some of these barriers. Thus, a fuller understanding of this coach-family relationship could inform future development of the FDC program's ability to positively affect individual mothers' lives, as well as the well-being of their families, and of society as a whole. Such positive outcomes could in turn also lead to policy recommendations.

Background on Poverty

Poverty has negative physical, psychological, cognitive, social, and health effects on the lives of adults and children over the course of their lives. State and Federal policies; environmental factors such as the quality of neighborhoods, schools, housing, jobs, and family; and personal factors can either exacerbate or buffer the adverse consequences of poverty. People living in poverty tend to have poorer physical and mental health and child development outcomes (Ackerman, Kogos, Youngstrom, Schoff, & Izard, 1999; Adler, Boyce, Chesney, Cohen, Folkman, & Syme, 1994; Chen, Matthews, & Boyce, 2002; DuBois, Felner, Meares, & Krier, 1994; Duncan, Yeung, Brooks-Gunn, & Smith, 1998; Haan, Kaplan, & Camacho, 1987; Lynch, Davey-Smith, Kaplan, & House, 2000; Lynch, Kaplan, & Shema, 1997;

Magnusson & Duncan, 2002; Marmot & Feeney, 2000; Masten & Coastsworth, 1998; Repetti, Taylor, & Seeman, 2002; Sameroff, 1998; Singer & Ryff, 1999; Smith, Brooks-Gunn, & Klebanov, 1997).

Factors related to poverty include chaos (Evans, 2004, 2006; Evans & English, 2002; Evans, Gonnella, Marcynyszyn, Gentile, & Salpekar, 2005; Wachs, & Corapci, 2008); food instability and related obesity, and other health problems (Alaimo, Olson, & Frongillo, 2000, 2001); substandard housing (Matte & Jacobs, 2000); neighborhood violence; and low educational and job opportunities (Leventhal & Brooks-Gunn, 2000, 2003). The poor-health impacts of poverty are often cumulative throughout life. Because the negative impacts of poverty are costly both to people living in poverty and to Federal and State governments, it is worthwhile to find effective ways to reduce—not simply alleviate—poverty by increasing sustainable family self-sufficiency.

Research on the abilities of families living in poverty to create healthy lives and become economically self-sufficient has identified multiple and complex societal barriers that include limited education and work experience, domestic violence, and physical and mental health problems (Blank & Kovak, 2008; Ehrenreich, 2001; Kalil, Corcoran, Danziger, Tolman, Seefeldt, et al., 1998; Loprest, 1999; Loprest & Zedlewski, 2002; Rubin, 1994; Tweedie, 2002). Evans (2006) demonstrated that chaos is one cause of these poorer outcomes of children living in poverty. This finding has important implications on the protective potential of a relationship with a credentialed coach, whose frequent goal-oriented meetings with mothers living in poverty appear to

reduce the chaos of poverty by helping the mothers critically reflect on their lives and stay focused on their goals.

The relationship between poverty and food insufficiency and poverty and obesity is another effect of poverty that could potentially be mitigated by a relationship with a credentialed coach. Alaimo, Olson, and Frongillo (2000) analyzed data from the Third National Health and Nutrition Examination Survey (NHANES III) to investigate the relationship between food insufficiency and cognitive, academic, and psychosocial outcomes in U.S. children and teenagers ages 6–16. Families who said they sometimes or often did not have enough food were considered food-insufficient. Food-insufficient 6- to 11-year-old children had significantly lower arithmetic scores, were more likely to have repeated a grade, and had difficulty getting along with other children. Food-insufficient teenagers were more likely to have been suspended from school and had other problems. One year later, the same research team also found that low family income was associated with overweight children ages 2–16. Based on results from NHANES III, the researchers considered children food-insufficient if the family sometimes or often did not have enough to eat. The study showed that older non-Hispanic white children living in low-income families were significantly more likely to be overweight.

Alaimo, Olsen, & Frongillo (2001) investigated the role of poverty-related food insufficiency in families, and found that up to 14 million women lacked reliable access to sufficient healthy food, and that mothers' roles in family food management rendered their families vulnerable to lack of fruits and vegetables in their diets, as well as to the potential of increased obesity. Such lack of family food management could

potentially be mitigated by a relationship with a credentialed coach, who is well positioned to help women living in poverty set and reach personal health-related goals, as well as help to improve the neighborhood by increasing access to healthy foods.

The following summary of the landscape of poverty in the United States since World War II provides a basic historical context for the poverty-related challenges faced by families in this study. With the hardships of the Great Depression of the 1930s and World War II still sharp memories for many Americans, 1945 ushered in an era of post-war prosperity. Many returning soldiers attended college or trade school funded by the G.I. Bill (U.S. Government, 1956), bought homes, and had babies. In the 1960s, during the presidencies of John F. Kennedy and Lyndon B. Johnson, a new national thrust emerged to eliminate economic poverty for all Americans by providing a basic “safety net” (Danziger & Danziger, 2005, p. 1). In 1964, President Johnson made poverty a national issue by declaring a “War on Poverty” featuring Medicaid, Medicare, Head Start, food stamps, school lunch subsidies, Aid to Families with Dependent Children (AFDC), and federal work-study programs. Johnson’s administration hoped to eliminate poverty within two decades.

In sharp contrast to these earlier social policies, a quarter of a century later, on August 22, 1996, Congress launched “Welfare Reform”: the Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA). In his 1993 State of the Union address, President Bill Clinton announced this shift as an “end to welfare as we know it” (Baratz & White, 1996). Effective July 1, 1997, the PRWORA replaced Assistance to Families with Dependent Children—an entitlement program which had been in place since 1935—with the Temporary Assistance for Needy Families (TANF)

program. Key features of the TANF program were a work requirement for all recipients, including those with young children; a five-year lifetime cap on benefits; and federal incentives to states to get people off welfare. The federal government proclaimed this reform a success, citing major reductions of welfare case loads between 1994 and 2004 (Baratz & White 1996). The TANF program was reauthorized in 2005.

Critics questioned whether the favorable economy rather than Welfare Reform was responsible for this drop in welfare roles, and wondered what would happen to the least employable families once their TANF lifetime benefits were exhausted, particularly if such exhaustion were to coincide with a national economic downturn (Lewit, Terman, & Behrman, 1997; Zuckerman, 2000). The momentous drop in welfare case loads did indeed slow, beginning in 2000, when the economy slowed. It is too early to know the full impact of the current recession on poor families, but the view emerging in recent years has shown that for many families, the experience of poverty, including hunger and homelessness, has worsened significantly (National Coalition for the Homeless, 2007). According to Blank and Kovak (2008), of the Center on Children and Families at the Brookings Institution, such worsening has been especially true for very poor “disconnected” (p. 1) single mothers—those who have neither stable jobs nor adequate welfare benefits. Blank and Kovak asserted that, compared to mothers who got off welfare, these disconnected mothers experience more challenging barriers to getting jobs, including lower education, having young children, higher rates of mental and physical health problems, substance abuse, and domestic violence.

Blank and Kovak (2008) of the University of Michigan proposed the establishment of a Temporary and Partial Work Waiver Program, combining medical support and other economic supports, and intensive case management, to assist very poor disconnected single mothers in moving toward self-sufficiency. The study reported here echoes and expands Blank and Kovak's findings while confirming the essence of Blank's recommendation.

Over the past decade, the family development approach taught to coaches who earn Cornell University's FDC has helped many families set and reach goals of healthier self-reliance. The Cornell FDC program, grounded in Bronfenbrenner's (1979) theory on the ecology of human development and Cochran's (1985) research on parental empowerment, helps family workers ("coaches") develop skills and competencies to assist families who are encountering societal barriers similar to those previously identified in the literature. One of the features of poverty not adequately addressed by poverty programs is the effect of chaos on the ability of mothers to set and attain goals; for example, goals of economic self-sufficiency (Evans, 2004, 2006; Evans et al., 2005). According to the present study (see Chapter 6), a relationship with a credentialed coach appears to help mothers living in poverty to set, sustain, and make progress on their goals for family self-sufficiency, despite significant barriers such as homelessness, limited education and work experience, the experience of domestic violence, and physical and mental health problems.

The Family Development Credential Program

To fully understand this study's research design and the discussion of theoretical frameworks (see Chapter 2), some background on the Cornell Family

Development Credential program is necessary. The Cornell FDC program trains and credentials family workers to coach low-income mothers to set and reach goals for overcoming barriers that interfere with the mothers' ability to create healthy sustainable lives. These barriers can include low education and work experience, domestic violence, and physical and mental health problems (Kalil et al., 1998; Loprest, 1999; Loprest & Zedlewski, 2006; Rubin, 1994; Tweedie, 2002).

The Cornell FDC program was developed beginning in 1994 as a collaboration between Cornell University, New York State, and local agencies throughout the state. Anticipating the federal Welfare Reform act then under development, the New York State Council on Children and Families convened a Commissioners Work Group on Family Support and Empowerment to review pertinent research, and then recommend state policy. The author and others from the New York State College of Human Ecology at Cornell were asked to provide an overview of research on human ecology and parental empowerment. The Commissioners Work Group, with leadership from the New York Department of State, then launched the FDC as a means of implementing these theories within state agency practice.

The 90-hour FDC curriculum *Empowerment Skills for Family Workers* (Forest [nee Dean], 1996; Forest, 2003) elaborates on the following core principles of strengths-based family development.

1. All people and all families have strengths.
2. All families need and deserve support. How much and what kind of support varies throughout life.
3. Most successful families are not dependent on long-term public support. They maintain a healthy interdependence with extended family, friends, other people,

spiritual organizations, cultural and community groups, schools and agencies, and the natural environment.

4. Diversity (race, ethnicity, gender, class, family form, religion, physical and mental ability, age, sexual orientation) is an important reality in our society, and is valuable. Family workers need to understand oppression in order to learn to work skillfully with families from all cultures.
5. The deficit approach, which requires families to show what is wrong in order to receive services, is counterproductive to helping families move toward self-reliance.
6. Changing from the deficit model to the family development approach requires a whole new way of thinking, not simply more new programs. Individual workers cannot make this shift without corresponding policy changes at agency, state, and federal levels.
7. Families need coordinated services in which all the agencies they work with use a similar approach. Collaboration at the local, state, and federal levels is crucial to effective family development.
8. Families and family development workers are equally important partners in this process, with each contributing important knowledge. Workers learn as much as the families from the process.
9. Families must choose their own goals and methods of achieving them. Family development workers' roles include helping families set reachable goals for their own self-reliance, providing access to services needed to reach these goals, and offering encouragement.
10. Services are provided so families can reach their goals, and are not themselves a measure of success. New methods of evaluating agency effectiveness are needed to measure family and community outcomes, not just the number of services provided.
11. For families to move out of dependency, helping systems must shift from a "power over" to a "shared power" paradigm. Human service workers have power (which they may not recognize) because they decide who gets valued resources. Workers can use that power to work with families rather than use power over them. (p. 37)

Principles adapted with permission from Cornell Empowerment Group (Allen, Barr, Cochran, & Dean, 1989).

The Family Development Credential curriculum then goes on to recommend the following steps workers should take to help families set goals—while noting that these steps often occur in a circular, not linear, way—and recommends ways to foster community collaborations designed to promote healthy environments.

1. Develop a mutually respectful partnership with the family.
2. Help the family identify its needs and strengths.

3. The family sets its own major goal and smaller goals leading to it. The worker helps the family identify ideas for reaching these goals.
4. The worker helps the family make a written plan for pursuing their goals, with some tasks being the worker's responsibility and others, the family's.
5. The family learns and practices skills needed to become self reliant. This is an ongoing process.
6. The family uses services as stepping stones to reach their goals.
7. The family's sense of responsibility and self-reliance is restored. (p. 38)

Credentialed family workers are trained to encourage the mothers they guide to reflect critically as they set and pursue goals to improve their own lives and society. In many cases, this discourse appears to lead to transformative learning and, in turn, to personal and social action. The terms "family worker" and "coach" are used interchangeably to describe the workers who coach low-income families.

Chapter 2: Underlying Theoretical and Conceptual Frameworks

The Family Development Credential program is theoretically undergirded by the theories of human ecology and parental empowerment. This chapter discusses these theories in depth, including how the concept of parental empowerment was influenced by the work of Brazilian community activist Paulo Freire, and German sociologist Jürgen Habermas, and then goes on to show how Bronfenbrenner's ecological model (1979) was adapted for the Family Development Credential text *Empowerment Skills for Family Workers* (Forest, 2003) as a tool for credentialed coaches to help families diagram the barriers and supports within their lives, pointing out the interrelationship of personal and societal issues. The chapter concludes with a discussion of the ways in which these underlying conceptual frameworks formed a foundation for the Cornell FDC program, which teaches coaches to help families and communities mitigate their socially toxic environments (Garbarino, 1995) by helping families set and pursue *their own* goals for improving their lives within their communities.

The Ecology of Human Development

Bronfenbrenner's human ecology theory and its progeny, the "bioecological" framework, are well-articulated (Bronfenbrenner, 1979, 2005; Bronfenbrenner & Ceci, 1994; Cochran, 1988). When Urie Bronfenbrenner introduced the theory of human ecology in 1979, he described his work as an "interface between developmental psychology and public policy" (1979, p. xiv). Two years earlier, Bronfenbrenner (1977) had criticized prevailing methods of psychological research and questioned the resulting conclusions by arguing that "much of contemporary developmental

psychology is the science of the strange behavior of children in strange situations with strange adults for the briefest possible periods of time” (p. 19).

Bronfenbrenner suggested that researchers should study children not in isolated university laboratories, but at home, at their day care center or school, or in their neighborhood—the settings in which they live. Bronfenbrenner recognized that human development research in these real-life settings added ecological validity to laboratory experiments. This suggestion was in marked contrast to typical research practices, which often drew conclusions solely from laboratory experiments. This researcher’s decision to conduct the present study in familiar settings within the families’ world was influenced by Bronfenbrenner’s observations. In his influential 1979 treatise, Bronfenbrenner recognized that children develop in *contexts* such as preschools and day care centers. In addition, he underscored that, although development does take place within a child’s immediate setting, which Bronfenbrenner termed the “microsystem” (p.7), it is also affected by nested and interrelated settings, which he termed the “mesosystem” (p. 209), “exosystem” (p. 237), and “macrosystem” (p. 238). Bronfenbrenner recognized that, although the developing person (e.g., a child) is not directly involved in systems within the exosystem (e.g., the workplace of the child’s parent), such systems can nonetheless have a profound impact on that person’s development.

Numerous scholars, including many of Bronfenbrenner’s Cornell University colleagues and graduate students, critiqued and refined his initial theory, sometimes with his collaboration. Glen Elder (1985) pointed out the importance of *time* in the human development process. This complemented the other aspects of

Bronfenbrenner's developmental theory (process, person, context) to form his process-person-context-time (PPCT) model of human development. Bronfenbrenner considered "proximal processes"—repeated, enduring interactions, such as feeding or playing with a child—as a cornerstone of this model of human development. According to Bronfenbrenner, for proximal processes to be effective, they must be consistent and positive. Poverty interferes with healthy proximal processes because of crowding, instability, and inadequate parental time and money.

A decade after Bronfenbrenner introduced his theory of human ecology, Bronfenbrenner and Morris (1998) refined Bronfenbrenner's original theory by expanding upon the bio-psychosocial aspects of human development at which Bronfenbrenner hinted in his 1979 treatise. Bronfenbrenner and Ceci (1994) elaborated further upon this work by considering the role of heredity in this developmental process.

Although Bronfenbrenner showed interest in many aspects of human development, he was increasingly concerned about the growing chaos of family life. He was an architect of social programs, especially Head Start, designed to prevent or mitigate negative effects of poverty and chaos. Bronfenbrenner (2005) believed that research could—and should—help improve human lives. He wrote,

The responsibilities of the researcher extend beyond pure investigation, especially in a time of national crisis. Scientists in our field must be willing to draw on their knowledge and imagination in order to contribute to the design of social interventions: policies and strategies that can help to sustain and enhance our most precious resources—our nation's children. (p. 272)

Lerner's (2005) foreword to Bronfenbrenner's (2005) capstone volume showed how individuals can interact with people and institutions to effect desired change:

The relations between an active individual and his or her active and multilevel ecology constitute the driving force of human development. These relations are also the focus of Bronfenbrenner's vision for enhancing the course of human life. The adaptive regulation of person-context relations—exchanges between the person and his or her ecology that function to benefit them both—should, from the perspective of the bioecological model, be the focus of . . . efforts to improve the course of human life at the levels of both individuals and their social world. Indeed, the plasticity of these relations, and thus the ability to maximize the possibility for adaptive developmental relations, defines the essence of being human within Bronfenbrenner's system. (p. xix)

Bronfenbrenner championed ways to apply his insights to improving the lives of children living in poverty. A prime example was his role as cofounder of Head Start. The Family Development Credential program is also rooted in Bronfenbrenner's research. (For more information on this link, see <http://www.human.cornell.edu/che/HD/FDC/research/Foundational-Research.cfm>.) The present study follows this trend by suggesting that this focus on improving individual lives and society should be the purview not only of the well-educated and prosperous, but also, with adequate support, of mothers working to rise out of poverty.

In the example shown in Figure 2, as credentialed coach Ms. Fiola Cummings talks with mother Ms. Cassandra Williams—a single mother who has a low education but aspires to a job that could provide a stable income for herself and her young child—about her goals, barriers, and resources, she can also use this as an opportunity to broaden the dialogue beyond the personal, into the societal. For example, if Ms. Williams were to talk about her difficulties in finding a job near her home that pays well, and her child care and transportation challenges, Ms. Cummings could not only help her identify resources to overcome these challenges, but also invite her to be part

of the panel Ms. Cummings is organizing to speak to city officials about the challenges of overcoming the barriers of poverty.

FAMILY DEVELOPMENT PLAN

HOW TO USE THE FAMILY DEVELOPMENT PLAN: Family worker, please ask the family if they want to fill out the form or want you to write. If you write, be sure to use their words. If the family member wants you to do the writing, read out loud what you have written. Ask the family member for any corrections, and make the corrections they request on all the sections except "in the worker's words." Give a copy to the family member, and keep a copy in your file. Each of you should review the form before your next meeting, to make sure you've each taken the steps you agreed on. Begin your next meeting by reviewing the last Plan.

• Family member's name Ms. Cassandra Williams
(Note what s/he likes to be called—Mr., Mrs., Miss, etc.)

• Address 1475 South Ave. (apt. 14c), Buffalo, NY 14006

• Phone(s) (note if home, work, or friends' phone) 223-1234

• Other family members involved in family development process (Let family define who they consider family members.) Note ages and male or female.

Alicia 2 yr. old daughter

• Today's date 8/12/96 • Worker's name Ms. Fiola Cummings

• Major goal (in family member's words)

finish word processing course so I can
get a job to support Alicia and myself

• Steps leading to this goal (note date each will take place.)

Steps family will take & when

Progress/Obstacles

- Apply for job training & to pay for BOCES course (by 8/19 meeting)

- Register for BOCES word pro course (by 8/19)

- Apply for child care subsidy (by 8/19)

- Get clothes for first day at BOCES (by 9/5)

- ~~Find~~ Find Someone to take care of Alicia (probably Mom) (by 8/19)

Steps worker will take & when

Progress/Obstacles

If BOCES won't let Ms. Williams register without
\$650, write letter saying she is eligible for
Job Training funds, has applied, worker says
BOCES will get check by 9/4.

(At your next meeting, note progress or obstacles to each step.)

Figure 2: Family Development Plan

• Family strengths and resources (in family member's words)
 - I was good at word processing in high school.
 - Mom will probably take care of Alicia while I go to course.

• Family strengths and resources (in worker's words)
 - Ms. Williams has kept appointments promptly.
 - She seems highly motivated to learn marketable job skills.

• Concerns (in family member's words)
 - Her mother is supportive and probably available for childcare.
 - Car keeps breaking down - how will I get to course?
 - need good clothes to wear to course.

• Concerns (in worker's words)

• Services available (include details such as names, addresses, phone numbers hours, etc.)
 - BOCES word processing course starts 9/6
 (Classes Mon.-Fri. 8:00-2:30 at center city BOCES, 2600 Washington Ave. Call Mrs. Whitebird to confirm, 222-3344. \$650 cost might be covered by Job Training, call Mr. Alexandro at 536-8800 to discuss application process.

• Notes
 - \$75/week child care subsidy available. Apply at JOB Center, 2680 Washington Ave. (Ms. Johnson). FILL OUT FORMS.
 - Women's Bldg 23 Center St. - good clothes, free, for job interviews etc.

• Family member's signature & date
 Ms. Williams 8/12/96

• Worker's signature & date
 Ms. Fida Cummings 8-12-96

• Next meeting date, time, place
 Aug. 19 2:00pm Ms. Williams's apartment

IF YOU CAN'T KEEP THIS APPOINTMENT, PLEASE CALL MS. Fida Cummings AT 225-1123 BY Wed. Aug 18 noon. THANK YOU FOR YOUR COURTESY.

Source: Claire Forest, *Empowerment Skills for Family Workers*, 1996.

Figure 2: Family Development Plan (continued)

Parental Empowerment

Through his observations within the Family Matters study, Moncrieff Cochran (1988), the study's coprincipal investigator, described the developmental stages of a "parental empowerment process" involving individuals with "progressively more distant environmental systems." Cochran wrote,

We propose that positive changes in self-perception (Stage I) permit the alteration of relations with members of the household or immediate family (Stage II), which is followed by the establishment and maintenance of new relations with more distant relatives and friends (Stage III). Stage IV is seen as information gathering related to broader community involvement, followed in Stage V by change-oriented community action. (p. 164)

In other words, as people change how they look at themselves, their relationships with themselves, their immediate family, and their extended family and friends also change. They gather information about how they might improve their own situation as well as that of their community, and often they ultimately become involved in making a difference.

Cochran and Henderson's (1986) definition of parental empowerment was informed by the work of earlier researchers and community leaders, especially that of Brazilian community educator and activist Paulo Freire and German sociologist Jürgen Habermas. Freire combined community education with adult basic education, educating poor farmers in both literacy and participatory democracy by encouraging them to write and speak up to those whose policies constrained their lives, as well as to each other. *Pedagogy of the Oppressed* (Freire, 1970), written while Freire was in political exile, introduced the concept of *conscientizacao*—consciousness-raising about injustice. It examined how to engage *with*, not *for*, oppressed people. Freire elaborated on this concept in *Education for Critical Consciousness* (Freire, 1973/2003), in which he quoted “an anonymous illiterate teacher”: “The democratization of culture has to start from what we are and what we do as a people, not from what some people think and want for us” (p. 81). Habermas (1984) laid out a new theory he called “communicative action,” which described a process through

which critical discourse regarding societal problems could lead to taking action to remedy them. According to Habermas, the ability to look critically at one's circumstances is key to being able to foster change within society and within one's own life. Critical discourse—examining with others the current and underlying aspects of societal or personal issues, and deciding whether and how to take action—is a key step in this process.

Cochran and Henderson (1986) combined Freire's notion of working with, not for, economically disadvantaged people with Habermas' ideas on the role of critical discourse about social problems into an approach they called "parental empowerment." They described parental empowerment as a "power with" relationship, in contrast to the more usual "power over" arrangement. Metcalf and Urwick (1941) traced back the term "power with" to organizational consultant Mary Follett, who used it to describe more egalitarian relationships in business settings. A key component of the parental empowerment approach is understanding that empowerment is not something a person can do for someone else, through compassion or force. Empowerment happens when people set their own goals for change. The role of helping systems, whether family, friends, or agencies, is to *support*—not to set—the goals of those they serve.

Simultaneous with the development of the Cornell FDC, a growing body of literature on empowerment was building on the cornerstone laid by Freire (1970). Collins (2000) and others developed a form of empowerment known as Black feminism, which, like Freire's work, combined personal and collective agency. Like Freire, Collins recognized the intersecting roles of oppression and individual and

collective agency. Collins added to this discourse by broadening the definition of what constitutes knowledge to include women's direct experience. Collins' insight is not only pertinent to the relationship between FDC coaches and the mothers they coach, but it also informed the choice of appropriate research methodology in studying this relationship. Collins (2000, p. 260) echoed Belenky, Clinchy, Goldberger, and Tarule (1986) in pointing out that "connectedness rather than separation is an essential component of the knowledge validation process" (p. 18). Collins (2000) elaborated, "This belief in connectedness and the use of dialogue as one of its criteria for methodological adequacy has African roots" (p. 260). Black feminist bell hooks (1989) wrote, "Dialogue implies talk between two subjects, not the speech of subject and object. It is a humanizing speech, one that challenges and resists domination" (p. 131).

Together, the concepts of ecology of human development and parental empowerment guide FDC coaches in helping families and communities mitigate the socially toxic environments (Garbarino, 1995) in which the families live. FDC coaches are taught to share power with families as families reflect on their experiences within their own culture and community. Then the families set and pursue *their own* goals for improving their lives within their communities. Sometimes these goals coincide with those imposed by Temporary Assistance for Needy Families welfare authorities, such as completing high school or securing safer housing. Yet, often parents coached by credentialed workers have broader vision than TANF welfare regulations will support, such as graduation from college, to increase their job prospects and thereby help their families rise out of poverty.

The example of Ms. William's Family Development Plan in Figure 2 offered an illustration of the way in which her credentialed coach Ms. Fiola Cummings applied both the theory of human ecology, and the theory of parental empowerment, to her work. The discussion first addressed how the theory of human ecology undergirds the FDC program, and then, how the theory of parental empowerment does the same, and finally concluded with observations on the interrelationship of these and other theories.

A practitioner steeped in the theory of human ecology would recognize that Ms. Williams' child was affected by Ms. Williams' own educational level and aspirations, as well as welfare and job training policies. According to Bronfenbrenner's theory, the repeated everyday interactions between Ms. Williams and her child (proximal processes) both drive a child's development and are in turn affected by these nested systems.

Bronfenbrenner's concern about the growing chaos of family life, particularly in the lives of children living in poverty, influenced the design of the FDC program by inspiring the Family Development Plan, and the mother-coach relationship, as mechanisms for countering that chaos. As we saw in Ms. Williams' plan, her coach Ms. Cummings met with her to help her set goals toward moving out of poverty, helped her arrange the services necessary to move forward on these goals, and planned to meet again to review progress and next steps. Such regular meetings could help counter chaos.

This snapshot is too brief to consider whether the relationship between Ms. Cummings and Ms. Williams fostered the societal change Bronfenbrenner considered

vital, yet overall, the FDC program emphasizes this “adaptive regulation of person-context relations” (Lerner, 2005, p. xix) at both the person-family and family-community levels. This emphasis is operationalized by teaching family workers to coach families to set and pursue their own goals, and to skillfully influence their communities to mitigate and transform the socially toxic conditions of poverty, violence, and despair, which undermine even the most dedicated mothers’ attempts to build sustainable, healthy lives for themselves and their children. Specifically, credentialed workers do this by (a) providing goal-centered life coaching for low-income women attempting to overcome the barriers to obtaining good jobs, and (b) working with community organizations and policy makers to strengthen communities and thereby lessen the negative effects of socially toxic environments.

Figure 3 illustrates how Bronfenbrenner’s ecological model (1979) was adapted for the Family Development Credential text *Empowerment Skills for Family Workers* (Forest, 2003) as a tool for credentialed coaches to help families diagram the barriers and supports within their lives. As coaches help mothers identify and find solutions to their challenges, they can use this tool to help point out the interrelationship of personal and societal issues.

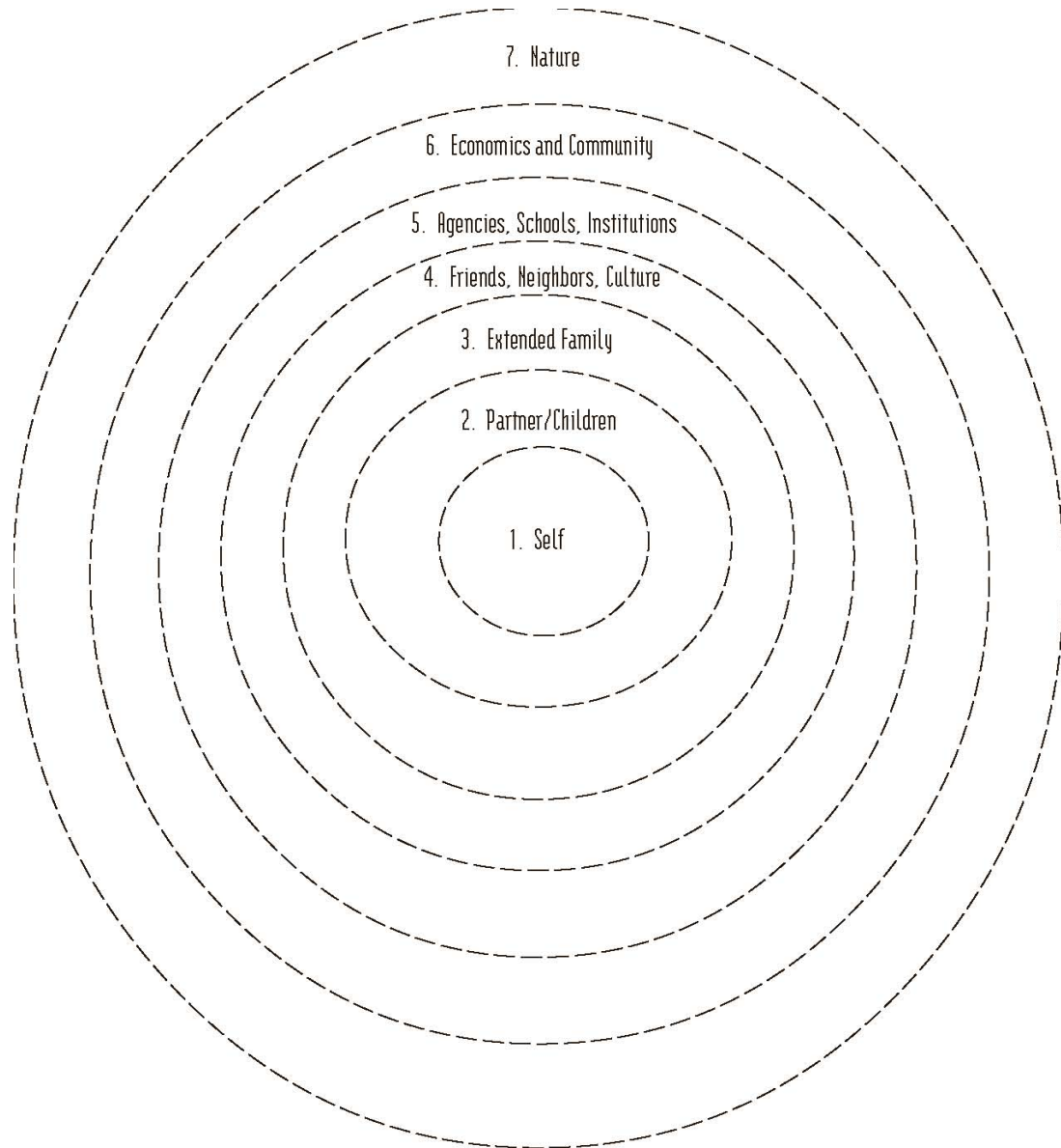


Figure 3: The Family Circles Model
(Forest, 2003, p. 106)

In the example shown in Figure 2, as Credentialed coach Ms. Fiola Cummings talked with mother Ms. Cassandra Williams—a single mother with little education but aspirations to a job that could provide a stable income for herself and her young child—about her goals, barriers, and resources, she can also use this as an opportunity

to broaden the dialogue beyond the personal, into the societal. For example, if Ms. Williams were to talk about her difficulties in finding a job near her home that pays well, and her child care and transportation challenges, Ms. Cummings could not only help her identify resources to overcome these challenges, but also invite her to be part of the panel Ms. Cummings is organizing to speak to city officials about the challenges of overcoming the barriers of poverty.

The FDC program is also undergirded by the theory of parental empowerment. The Family Development Plan is designed to foster the aforementioned “power with” relationships, in contrast to the more usual “power over” arrangements, in which a social worker might give the client a “to do” list to accomplish. From Ms. Williams’ Family Development Plan, we see notes from her meeting with her coach Ms. Cummings, in which Ms. Williams’ own words were used to reflect the beginnings of a critical dialogue about her goals and ideas for accomplishing them. This illustration provides only the initial-meeting snapshot of the relationship between Ms. Williams and her coach, but does note the role of helping systems, family, and Ms. Cummings’ agency to *support*—not to set—Ms. Williams’ goals.

This one session hints at, but does not fully document, the possibilities of a critically reflective dialogue between mother and coach, offering the potential to combine personal and collective agency to recognize the intersecting roles of oppression and individual and collective agency noted by Collins (2000). It was precisely this kind of humanizing *dialogue* that was called for by Collins (2000) and Belenky, et al. (1986) and hooks (1989).

Chapter 3: Subsequent Conceptual Framework—Transformative Learning

While the Ecology of Human Development and Parental Empowerment were the conceptual frameworks underlying the Family Development Credential program, when analyzing data from this study, the author found the theory of transformative learning to be a useful conceptual addition. Although one might presume that FDC coaches are teaching mothers to learn new tasks, to perform their parenting tasks more effectively, data from this study show that something more—transformative learning—is occurring. Therefore, the origins, turning points, potential applications, and limitations of transformative learning theory are discussed here, as they relate to the lives of women working with FDC coaches, to give the reader a clearer understanding of this study. The present study suggests that transformative learning theory may begin to provide one explanation of how the relationship between U.S. mothers living in poverty and their credentialed coaches helps these mothers overcome barriers to their goals for a better life.

According to Greek myth, Sisyphus was doomed to push a boulder up a mountain, then with the end of his heavy labor in sight, watch it crash down, forever repeating this ineffective cycle (Camus, 1955). Jack Mezirow opened his seminal journal article on transformational learning (Mezirow, 1978b) by retelling this myth to illustrate the need for “perspective transformation,” a cornerstone of his then-new concept. Relentless labor with little hope of escape to a better life is an all-too-familiar refrain for mothers living on low incomes (Adair, 2004; Mitchell, 2003). Yet, when Mezirow (1978a) developed this concept, he focused his research on middle-class white women returning to college, not women living in poverty. His examples of

“everyday life” ranged from American, upper middle-class college women to Brazilian peasant farmers working with activist adult educator Paulo Freire, but ignored the everyday life of the vast population of American women living in or near poverty. One wonders about the needs and capacity for transformational learning in the waitress who refills scholars’ coffee cups, the hotel chamber maid who scrubs conference hotels, the office worker who retypes scholarly papers—the kind of workers welfare reform hopes women in poverty will become. Do their lives feel like that of Sisyphus? Can transformational learning liberate their lives from drudgery and limited prospects? What new insights might their experiences contribute to our understanding of the process of transformational learning?

The women whose college reentry experiences inspired Mezirow’s theory of transformational learning were inherently more privileged than the millions of U.S. women constrained by low wages or welfare support and the resulting limited life choices for themselves and their children. Yet, in his report on this study (1978b), Mezirow suggested that his findings may have generic relevance to adult and continuing education, a claim that may have been too broad without additional research involving different and more specific populations.

Hundreds of scholars both within and beyond adult education have conducted empirical research based on Mezirow’s theory (Cranton, 2002; Merriam, Caffarella, & Baumgartner, 2007; Taylor, 1997, 2000, 2007; Tennant, 1993). Yet, neither Mezirow nor these other scholars have examined the need or potential for transformative learning in U.S. women living in poverty, who appear to have a great need for adult

education programs that foster transformative learning, and who may also have valuable insights to contribute.

Many of the families in this study appear to have experienced transformative learning, which appears to have been a significant factor in their empowerment. Thus, the following section discusses transformative learning theory, particularly the role of perspective transformation. The principal critiques and turning points in the thirty-year discourse on transformational learning theory are discussed, especially those related to social change and empowerment. These aspects may have particular relevance to any application of this theory to women living in poverty.

The Details of Mezirow's Theory

In 1978, when Mezirow introduced the concept of transformative learning, he initially conceived of it as an individual process. Mezirow (1978b, p. 101) described four common types of adult learning—how to do something, how something works, how to cope with other people, and how to form an evolving self-concept—then added a fifth type, which he termed “perspective transformation”:

This involves learning how we are caught in our own history and are reliving it. We learn to become critically aware of the cultural and psychological assumptions that have influenced the way we see ourselves and our relationships and the way we pattern our lives. Let me refer to this as learning about “meaning perspectives.” A meaning perspective refers to the structure of cultural assumptions within which new experience is assimilated to—and transformed by—one’s past experience. It is a personal paradigm for understanding ourselves and our relationships.

Mezirow considered perspective transformation “cardinal” to adult learning, and a first step to transformational learning (p. 101). He elaborated,

When a meaning perspective can no longer comfortably deal with the anomalies of a new situation, a transformation can occur. Adding knowledge,

skills, or increasing competencies within the present perspective is no longer functional; creative integration of new experience into one's frame of reference no longer solves the conflict. One is not only made to react to one's own reactions, but to do so critically. (p. 104)

Mezirow (1978b) outlined a three-phase cycle of transformation:

1. *alienation* (from prescribed social roles)
2. *reframing* (restructuring one's conception of reality and one's place in it)
3. *effecting change* (through one's own initiative) (p. 105)

Mezirow suggests that this process can result in a new "meaning perspective" (p. 105), which he would years later rename "habit of mind" (Mezirow, 1997, p. 5). He believed that education could make a significant contribution to this process, critiquing the dominant state of adult education as overly focused on developing competencies and learner performance. He urged the field of adult education to recognize the importance of perspective transformation in adult learning. He considered this "fundamental revision" (p. 107) necessary within the field, suggesting that a "disorienting dilemma" (Mezirow, 1990, p. xvi) such as a divorce, job loss, or health crisis, often sparked a perspective transformation.

Criticisms of Mezirow's Theory

Brooks (2000) questioned whether Mezirow's process works in the same way for women. She wrote,

Although only a few studies have focused specifically on women's transformative learning, these studies and research on women's development suggest that many women may not experience transformative learning as the existing theories suggest.... The notion of transformation implies a metamorphosis into an entirely new form as opposed to a simple adaptation of the existing form.... (pp. 139–141)

While Brooks was not referring specifically to the audience addressed in this article—women living in poverty—her conclusion could inform any studies of transformational learning with this group of women, by cluing the researcher into the transformative potential of small steps. In lives overshadowed by relentless poverty, moments of positive fanfare are rare, yet keeping Brooks’ observation in mind when analyzing the data from this study can reveal valuable insights that might otherwise be overlooked.

Lack of a “Coherent, Comprehensive Theory of Social Change”?

By 1981, Mezirow’s definition of transformational learning included a more explicit description of the process of critiquing influences on one’s perspective, but Collard and Law (1989) considered his theory flawed because it focused on individual transformation, a process they believed could not occur without concurrent attention to cultural and social issues. They criticized Mezirow’s theory for “the lack of a coherent, comprehensive theory of social change” (p. 102). Mezirow (1989) responded:

Social action is crucial, but it is not the only goal of adult education. In my view, it is a contingent and instrumental goal. As learners come to be critically reflective of the presuppositions upon which their beliefs are predicated and learn about their sources and consequences, meaningful transformations become possible. A part of the process is discovering that one is not alone in his or her problem, that there are social practices and institutions which also oppress others by legitimatizing and applying sanctions to support distorted belief systems (ideologies which may be social, political, economic, occupational, educational, religious, or technological). When learners come to identify with others who have been similarly oppressed, collective social action may develop.... But this is the learner’s decision, not the educator’s. (p. 172)

In other words, Mezirow acknowledged the importance of social action, but considered it the domain of the learner, not of the adult education process.

In an article entitled “Empowerment and Emancipation,” Tom Inglis (1997) analyzed Mezirow’s “psychologicalization of the process of emancipation” (pp. 3–4), criticizing Mezirow for locating social change within the individual. Inglis continues,

While not abandoning this emphasis on self-critical individuals engaging in a process of self-realization, there is a need to take an understanding of human emancipation away from notions of liberating a pre-existing, essential self toward a more realist or structuralist understanding of power. Instead of individuals, the focus shifts to fields of discourse and practice within which individuals are constituted. Thus, without an analysis of power there is a danger that transformative learning, instead of being emancipatory, could operate as a subtle form of self-control. (pp. 3–4).

Inglis compared Mezirow’s approach to social change to that of Freire, saying that both insist praxis is necessary to transformative learning. He quotes Mezirow as arguing that “all too frequently transformative learning remains at the level of individual development and does not move into the task of ‘learning to successfully overcome oppressing power in one’s external world through social action’” (1997, p. 357). Inglis maintains that Mezirow balks at collective social action (Clark & Wilson, 1991; Collard & Law, 1989; Hart, 1990; Tennant, 1993). According to Inglis (1997, pp. 3–4),

... despite Mezirow’s call for social action, however, this theory leads to an over-reliance on the individual rather than social movements as the agency of social change and, consequently, to an inadequate and false sense of emancipation. Mezirow believes that money, power, and ideology are simply distortions preventing open, honest communication between people. He rejects a structuralist position. (pp. 3–4)

Mezirow (1998b) replied that Inglis’s assumption was erroneous, stating that, in fact, Mezirow supports a structuralist position. He roundly rejected Inglis’ critique as “totally off the wall.” This exchange was productive even though Mezirow rejected Inglis’ criticism, because it prompted Mezirow to elaborate on his own views on social

change: “Transformative learning is about emancipating ourselves from these taken-for-granted assumptions about social being. It involves bringing the sources, nature, and consequences of this received wisdom into critical awareness so that appropriate action—including social action—can be taken.” (p. 71)

Balancing personal and structural change within any transformative, learning-based adult education efforts is important with women living in poverty. In other words, it may be a disservice to these women to neglect either aspect of this equation. For example, if a woman identifies her inability to “stretch” her grocery money as a family problem, an adult educator should not assume that this is strictly an individual problem that could be remedied by a perspective transformation, or even by attending budgeting classes. Helping the woman (and perhaps her neighbors) to analyze the structural as well as the personal issues may reveal, for example, a lack of reasonably priced grocery stores nearby, an issue that cannot be overcome personally but requires structural action.

Is Transformative Learning Theory “Decontextualized”?

Clark and Wilson (1991, pp. 260–262), furthering and expanding upon Collard and Law’s critique, criticized Mezirow’s theory as built on “values which reflect the dominant culture (i.e., white, male, middle class)” —that is, that Mezirow’s theory was “decontextualized.” Wilson, then professor of adult education at the University of Georgia (Athens), hosted the 1990 Adult Education Research Conference there, inviting Hart, Mezirow, and Clark to join him in addressing the topic “Emancipatory Education: Further Examination of Mezirow’s Theory of Adult Learning.” While Hart criticized what she considered Mezirow’s misapplication of Habermas’s theories to

the theory of transformative learning, Clark and Wilson (1991) focused on two problems in Mezirow's theory: his "decontextualized analysis of experience," and his "notion of rationality" (p. 260). Let us first examine their charge of decontextualization:

Mezirow studied women without taking into account the particular context within which the women's experience is situated and by which it is defined, namely the hegemonic culture of patriarchy. Their experience of perspective transformation was directly related to their position in this dominant culture, since it was precisely those dominant cultural assumptions that were being critically examined. It was out of that analysis of those hegemonic assumptions that new meaning structures were constructed. Yet Mezirow removed this process from its context and in so doing suggests that the women's experience is generic. We would argue that the meaning of these experiences cannot be fully understood apart from their context; to do so is to distort that meaning. (p. 260)

Mezirow (1991) responded that while his 1970 study was indeed focused on women returning to college, and it failed to acknowledge a "fledgling" literature of feminist psychology, he assumed Clark and Wilson's critique was lodged more in his own inability to fully communicate his points than in a theoretical difference. This exchange points toward the need for contextualized research on transformational learning with women from a wider range of backgrounds than his initial research. It also underscores the importance of context remaining a key aspect of any such research, and an analysis of related social trends being included in the discussion of such research.

Tennant (1993), reviewing the literature on Mezirow's theory, acknowledged that "Mezirow's theory has been criticized for lacking a social critique, emphasizing personal transformation, and balking at the notion of collective social action" (p. 35),

but defended Mezirow (p. 36) by quoting Mezirow's (1991) response to this call for social action: "All adult educators have a responsibility to participate actively in public initiatives in support of political, economic, and social changes that assist all adult learning to overcome constraints that hinder their full, free participation in rational dialogue" (Mezirow, 1991, p. 212).

Mezirow followed with a more elaborate response entitled "On Critical Reflection" (1998a). Instead of taking this opportunity to discuss the potential role of critical reflection in fostering social change, Mezirow analyzed critical reflection assumptions (referred to by Mezirow as "CRA"), which he considered "central to understanding how adults learn to think for themselves rather than act on the concepts, values, and feelings of others" (p. 1). Mezirow had also, by this juncture, begun referring to his transformational learning theory simply as "Transformation Theory" (p. 8). Mezirow included that article in a section entitled "Critical Reflection Assumptions and Assimilative Learning," which this reader hoped would discuss the role of culture and context in developing assumption, but instead Mezirow introduced this new term into the taxonomy of transformational learning, and offered the following central assumption:

Learning may be understood as the process of using a prior interpretation to construe a new or revised interpretation of the meaning of one's experience in order to guide future action. The description of CRA as involving the active construction of knowledge helps us differentiate the learning dynamic that pertains in childhood from that which may become manifest throughout CRA in adulthood. (p.)

Although few studies have focused specifically on women's transformative learning, the research on women's development suggests that many women may not

experience transformative learning in the way that existing theories suggest.

According to Mezirow, transformation requires a disorienting dilemma leading to a metamorphosis into an entirely new form, as opposed to a simple adaptation of the existing form. However, Clark suggested that in women, a (sometimes lengthy) “integrating circumstance” (1993, p. 81) —not merely a disorienting dilemma—can catalyze perspective transformation.

Belenky and Stanton (2000) suggest that an unacknowledged preliminary step, of knowing one knows, exists before perspective transformation can occur. They considered that Mezirow has unwittingly written of transformative learning as a complete process, when in fact the steps he described are actually the endpoint in a long developmental process. They write,

Unless it is understood that Mezirow’s theory only depicts the culmination point, practitioners might overlook the reality of their students’ lives. Most adults simply have not developed their capacities for articulating and critiquing the underlying assumptions of their own thinking, nor do they analyze the thinking of others in these ways. Furthermore, many have never had experience with the kind of reflexive discourse that Mezirow prescribes....Transformational learning theory also presumes relations of equality.... Mezirow does not concern himself with the problems of inequality. He writes in this volume: “Hungry, homeless, desperate, threatened, sick, frightened, adults are less likely to be able to participate effectively in discourse to help us [*sic*] better understand the meaning of our own experiences.” (p. 73)

This researcher agrees with Belenky and Stanton. Women’s ways of knowing have long been disregarded, undervalued, and eclipsed by the expert-focused formal educational systems which consider hierarchical discourse superior to the conversational information sharing between equals that is characteristic of women’s informal conversations, and to a woman’s own process of coming to understand

something. This researcher wonders if relationships between credentialed family workers and mothers living in poverty offer an opportunity for these mothers to learn these preliminary steps: “developing their capacities for articulating and critiquing the underlying assumptions of their own thinking ... [and] the thinking of others, ... [as well as] the kind of reflexive discourse that Mezirow prescribes” (Belenky & Stanton, 2000, p. 73). The mother-coach relationship appears to help women find their voice in the discourse considered necessary for perspective transformation to occur.

Brooks (2000) considered narrative a vital component of transformational learning, especially among women. She suggested that sharing stories with other women in a protective environment has long provided women with a chance to “claim their own voices,” and often becomes the catalyst for taking action. Women’s consciousness-raising groups, whether formed explicitly to foster personal and social awareness and action, or arising informally wherever women gather, can provide an opportunity for women to speak with their true voices. In discussing her study of women’s consciousness-raising groups, Hart (1990) reflected:

In a way, consciousness raising “skips” the process of simple reflection (in the sense suggested by Mezirow). Because the mutedness of women’s experiences has not (yet) allowed them to reach a level of belief that can be examined and validated, the simultaneity of remembering and understanding that occurs in consciousness raising always constitutes critical self-reflection. (p. 55)

What can we learn from the stories of women within the FDC program—both mothers and their credentialed coaches—about ways their lives in poverty are constrained by societal limitations? Mothers’ consciousness-raising experiences with the credentialed workers who coach them may help these mothers overcome some of these barriers.

As America's formal government-run "safety net" (Danziger & Danziger, 2005, p. 1) unravels in these tough economic times, can the stories of mothers and coaches in this study can provide insights into the role of dialogue between these women in helping these mothers become aware of their current and past experiences, and begin to critically reflect on these experiences.

Chapter 4: Previous Family Development Credential Studies

Since the inception of the FDC more than a decade ago in New York State and its subsequent adoption by other states, a growing body of literature on this program has emerged. Preliminary research on the FDC program by other scholars (Crane, 2000; Mosley & Smith, 2003; Smith, McCarthy, Hill, & Mosley, 2007), Watson Smith (2003) and Palmer-House (2006) showed increased abilities in FDC-trained workers, but only Palmer-House (2006) examined the workers' insights into how their abilities to foster empowerment were nurtured. A detailed discussion of these studies follows below, and culminates in a discussion of how the present study fills a critical gap in knowledge about the Family Development Credential program.

Crane (2000) held in-depth interviews with 16 worker supervisors at three FDC programs in New York State, then reported the following outcomes:

1. *Personal development:* Workers reported increased self-esteem, confidence, and assertiveness in both personal and work settings.

2. *Increased knowledge and skills for effective family development practice:*

Workers reported better understanding of how to communicate, foster mutually respectful relationships, recognize and build on strengths, and help families set and reach goals.

3. *Community outreach skills:* Workers reported increased knowledge of how to recruit families to programs.
4. *Time- and stress-management programs:* Workers reported increased ability to manage their time and stress.

5. *Greater cultural competence*: Workers reported that they were better able to work with people from a wide range of cultures.

Using the United Way's program logic model, Crane (2000) noted initial, intermediate, and long-term outcomes of the impacts of workers holding the FDC within the two communities studied. She hypothesized that as a critical interagency mass of FDC-credentialed workers developed competence in and used the family development approach in their work with families and communities, families would benefit from the consistent application of this model across helping systems within communities. As families became better able to set and reach their own goals, they would become less reliant on social services. Finally, as communities became stronger and better able to create healthy conditions for families, democratic action would occur. Crane defined democracy as "family members and workers [realizing] their power and [using] their 'voice' for change" (p. 247). Although Crane did not attempt to empirically test her model, her research documented intermediate outcomes of FDC training and pointed to the link between FDC training and democratic action.

Mosley and Smith (2003) held two focus groups with workers ($N = 13$) trained and credentialed in the Missouri FDC program, which is modeled on and affiliated with the Cornell FDC, to understand how this training influenced workers. Echoing some of Crane's findings but not addressing others, these workers reported that after FDC training they (a) were better able to set boundaries with client families and thus avoid burn-out; (b) experienced increased job confidence; and (c) experienced increased ability to communicate with clients, colleagues, supervisors, and their own families. Mosley and Smith (2003) then collected pre- and posttest data from 48

workers who completed FDC training, to examine the impact of the course on global self-esteem, self-mastery, and job self-esteem. They compared these results with those of 53 family workers who did not undertake FDC training. They found that those who took the FDC training (a) showed significantly greater gains in all three measures and in job satisfaction and professional self-esteem, and (b) experienced significantly less job turnover.

Smith et al. (2007) later built on their focus-group data to design and conduct a larger comparative study, again comparing credentialed workers with other social service workers ($N = 227$). Like Mosley and Smith (2003), this 2007 research group found significant differences between credentialed workers and the control group in the following measures: (a) overall self-esteem, (b) job self-esteem, (c) job mastery, and (d) reduced burn-out. However, they did not find significant results in communication skills or job satisfaction. This study, which took place seven years after that of Crane (2000), confirmed via its focus group some of the earlier study's findings. The Smith et al. (2007) and Mosley and Smith (2003) studies both added the comparative dimension Crane's study lacked.

Nearly simultaneous with this 2007 study, Palmer-House (2006) completed a Columbia University doctoral dissertation examining workers' experience of FDC training. Specifically, Palmer-House set out to understand FDC-credentialed workers' perceptions of what and how they learned that helped them to help families build on strengths and set and reach goals for increased self-reliance. Agency supervisors referred workers who were considered effective in helping families reach such goals; from these, 15 workers were selected. Study participants completed a "Definitions of

Empowerment” survey and participated in semistructured interviews. Twenty-five family members coached by credentialed workers also participated in brief interviews. Data analysis revealed workers’ perceptions of knowledge, skills, learning strategies, and factors that affected their ability to help families set and pursue their own goals. Workers reported increased knowledge and skills in the following areas: (a) attending (listening, empathizing, and developing mutually respectful relationships), (b) processing (goal-setting, advocating, and recognizing strengths), and (c) meaning-making (understanding roles of the family and worker in the family support process). Palmer-House found an association between workers’ processing and meaning-making skills and the length of time they were employed as family workers.

Workers reported learning through the following means: (a) life experiences, (b) professional practice, (c) strengths-based training, and (d) support networks at their place of work. Palmer-House (2006) attributed differences in workers’ perceptions to their increased abilities developed through experience. Moreover, her research findings suggested possible developmental differences in workers’ perceptions of the impact of external and environmental factors such as legislative reforms, outcomes measures, and performance-based funding. Palmer-House concluded that workers may experience developmental stages of learning based on differences in their perceptions in three areas: what they learned (attending, processing, meaning-making), how they learned (training, support systems, disempowering experiences, professional practice), and perceptions of the impact of environmental and external factors (legislative reforms, outcomes measures, performance-based funding).

Workers with two to five years experience perceived a dissonance between empowerment-based practice, and the impact of the endemic deficit-based procedures used in legislative reforms. Workers with five to ten years experience perceived legislative reforms paradoxically created greater demand for workers' services with fewer available resources. For workers with over ten years experience, the impact of legislative reforms was perceived to undermine the overall effectiveness of strengths-based work with families. They described that legislative reforms more often supplanted positive policy changes with unfunded program mandates, insufficient funding, overemphasis on program outcome measures, compartmentalization of services, and allowing undue influence of funders on the quality of outcomes (Palmer-House, 2006).

Another central finding of the study proposed that workers may experience three developmental shifts in learning over the course of their employment: (a) socialization (learning to work in a strengths-based way) for workers with two and five years' experience, (b) internalization ("resolving dissonance about limitations in their abilities to mediate barriers to family empowerment" [Palmer-House, 2006, p. 201] for workers with between five and ten years experience), and (c) identification (viewing empowerment as shaped by the contexts of culture, experience, and outside influences) for workers with over ten years experience. In her reflection on the study, Palmer-House suggested that workers learned to help empower families by learning to empower themselves. Palmer-House asserted,

Workers' perceptions suggested they learned by making paradigm shifts that empowered them to address and overcome their own barriers to fostering the empowerment of others. As workers enhanced their own sense of self-

empowerment, they increased their knowledge and skills to help empower families. Workers' learning did not involve a simple transfer or application of new knowledge and skills. It appeared to fulfill a worker's deep-seated desire to make a positive difference in the lives of others. (p. 225)

Watson Smith (2003) conducted a study of the impact of FDC training on Head Start staff. She compared outcomes of a treatment group of seven Head Start family workers who completed FDC training with a comparison group of seven social services workers who had not. Selection criteria for both groups included the absence of college attendance. Watson Smith asked whether Head Start family workers can, with FDC training, demonstrate the types of skills, knowledge, and attitudes necessary to support families in becoming less dependent on public support. The study looked specifically at whether staff completing the FDC training treated families as partners and encouraged them to set and pursue their own goals, rather than depend on workers to choose goals for them. Watson Smith collected several types of data, including questionnaires administered pre- and post-FDC training, surveys, observations, and program documents, then analyzed the workers' communication skills, job-related knowledge, and attitudes toward the families. Watson Smith found that workers who participated in FDC training demonstrated improved communication skills, attitudes toward families, and knowledge of community resources.

While these previous FDC studies were informative, none considered the experiences of families coached by credentialed workers or the process FDC coaches use to collaborate with mothers as they identify and work toward goals for a better life. None of these studies examined what meaning families and coaches each ascribe to their interactions, how their joint work helps these mothers pursue goals and

overcome their barriers, the nature and significance of this relationship, and what role, if any, parental empowerment plays in this work. These issues are important because these mothers' problems are often resistant to conventional "help," and the FDC process appears to offer effective ways of transforming their long-ingrained intergenerational problems. If so, understanding the mechanism for such transformation offers the possibility of helping a large number of families overcome poverty.

Chapter 5: The Present Study

Research Questions

The research questions addressed in this study are as follows:

1. What can be learned from the narratives of mothers and FDC coaches about the kinds of barriers and challenges mothers encounter as they set and work toward goals, and the methods coaches use to help them overcome these barriers and challenges?
2. How do mothers and FDC coaches perceive the meaning and significance of their relationship and their experience in working together?
3. What aspects of the coach-mother relationship empower mothers to set and pursue goals for a better life for themselves and their children?

The rationale for selecting these questions is discussed below.

Question 1: What can be learned from the narratives of mothers and FDC coaches about the kinds of barriers and challenges mothers encounter as they set and work toward goals, and the methods coaches use to help them overcome these barriers and challenges?

Several barriers interfere with low-income mothers' ability to find and keep jobs and create healthy sustainable lives for themselves and their children. These hurdles include limited education and work experience, experience of domestic violence, and physical and mental health problems (Kalil et al., 1998; Loprest & Zedlewski, 2002; Tweedie, 2002). Question 1 was developed out of a curiosity to know more about how the relationship between mothers living in poverty and their credentialed coaches appears to help these mothers overcome barriers to self-

sufficiency, since understanding the mechanism for such transformation would offer the possibility of helping a large number of families overcome poverty.

Question 2: How do FDC mothers and FDC coaches perceive the meaning and significance of their relationship and their experience in working together?

The Family Development Credential curriculum *Empowerment Skills for Family Workers* (Forest, 2003) advises coaches that developing “mutually respectful relationships” with families is a cornerstone to helping families set and pursue their own goals for healthy self-reliance (pp. 197–205). Previous research on the FDC program (Crane, 2000; Mosley & Smith, 2003; Palmer-House, 2006; Watson Smith, 2003) showed how coaches viewed their own work within the FDC program, but there had been no parallel evidence gleaned from mothers or on the coach-mother *relationship* that the FDC curriculum suggests be developed. Parallel evidence from mothers could provide triangulation, which would either increase or refute the validity of coach data. It would also provide valuable insights into mothers’ experiences, in their own words.

Question 3: What aspects of the coach-mother relationship empower mothers to set and pursue goals for a better life for themselves and their children?

The concept of parental empowerment (Cochran, 1985, 1988; Cochran & Henderson, 1986) provided an underlying conceptual framework for the Cornell Family Development Credential program, yet little is known about whether mothers and/or coaches perceive their relationship as empowering to these mothers, and if so, how it is empowering. Answering this pair of questions would show how closely the

FDC program's theoretical foundation of parental empowerment translates into practice and offer insights for program improvement.

Research Methods

Site and Respondent Selection

During 2005, this researcher conducted individual narrative interviews with 10 FDC workers and 25 mothers. Workers who earned the FDC since 2004 were selected through a randomized process from two nonrandomly selected locations (New York City plus a rural upstate county) with well-established FDC programs. Although random selection is more commonly coupled with positivist methods such as a controlled trial, it can also strengthen validity in a qualitative, narrative study by increasing the likelihood that a wide range of respondents are invited to participate. This was especially important in this case, as the investigator is deeply involved in the FDC program and, by using a nonrandom selection process, could have inadvertently chosen participants who would confirm her own unexamined biases.

To be included in the pool of potential study participants, mothers coached by FDC family workers were required to have met with an FDC worker at least three times prior to the study, and to have set a major goal and smaller goals. Three eligible mothers (or grandmothers) were randomly selected from each worker's case load, then invited to participate. The final sample consisted of 25 mothers: 11 from the rural site and 14 from the urban site. Data were collected through 30- to 60-minute narrative interviews with FDC workers and family members. Interviews with rural mothers and their credentialed coaches were held in the following settings:

- Health center with an outreach program staff

- Rural Head Start center
- Literacy program affiliated with subsidized housing
- Mother's home
- Great-grandmother's work place

Interviews with urban mothers and their credentialed coaches occurred in the following settings:

- Inner-city homeless center
- Inner-city Head Start center
- After-school homework program used as child care for school-age children
- New York City Office of Child Abuse Intervention

Prior to the interviews, workers and mothers received and reviewed the study description and informed consent forms. At the time of the interviews, participants were asked to provide pseudonyms appropriate to their cultural background, which were used throughout transcript preparation and analyses, including for this dissertation. With participants' permission, interviews were audiotaped, then transcribed by a transcriptionist in confidence. Transcripts were mailed to the participants (or at some family members' request, to their coaches in sealed envelopes) for their review. Once their transcripts were reviewed and returned, coaches and family members each received a \$50 stipend for their participation in the study. In each case, the researcher made field notes following the interviews, which added another dimension of richness to the analyzed data.

A note on the study's use of the term "mother" is in order here. The rigorous selection process described above yielded 25 mothers willing to participate in

interviews. When the researcher arrived at the interview sites, a small number of these mothers turned out to be grandmothers (or great-grandmothers), mothering their grandchildren (or great-grandchildren) because of the actual mother's absence due to drug addiction. At two urban interviews, male family members showed up when the mother was expected. In the first of these interviews, when a young mother arrived for her interview with her infant's father cradling their baby, the researcher decided that an inclusive approach might yield valuable data and therefore interviewed both parents together. In the second of these interviews, the mother sent an uncle as the family's interviewee because of his nurturing role within the family. Once again, the researcher took an inclusive approach and interviewed him. In each instance, the researcher's broad interpretation of "mothering" provided valuable insights into the family development process. In this researcher's view, such an inclusive approach is consistent with the realities of modern family life. The researcher considered broadening the term for interviewees to "family members," but when readers of the draft research report appeared confused by the term, decided to retain the term "mothers," albeit with this explanatory note.

Narrative Interviews

Narrative inquiry was used for data collection because it is well suited to investigating questions related to the meaning and significance of personal experiences (Clandinin & Connelly, 2000; Coles, 1989; Reynolds & Vince, 2004). According to Riessman (1993), narrative inquiry is "not useful for studies of large numbers of nameless, faceless subjects" (p. 69). Clifford Geertz (1973) advised researchers that "thick description" (pp. 3–30) provides a penetrating insight that can

help the researcher deeply understand complex research questions, a suggestion followed in this study. The thick description employed in narrative research can provide insights crucial to understanding the data and to possible theory development.

Polkinghorne (1995) delineated two types of narrative inquiry—descriptive and explanatory. Descriptive narrative inquiry provides data that describe a setting, situation, or interaction, whereas explanatory narrative inquiry attempts to explain one or more of these. Both employ the same basic methods of conducting and transcribing open-ended, in-depth interviews designed to solicit stories that are then analyzed for meaning and significance. This study used narrative data both to describe and to explain. Flyvbjerg (2001) suggested that narrative inquiry is especially useful in fostering a discussion of values; thus, data from this study might illuminate such values-oriented questions as the relative merits of federal “work first” policy requiring parental employment, and young children’s needs for parental presence and protection. Although other types of inquiry, such as survey or experimental research, could also answer such questions, the amount of detail provided by narrative inquiry can shed more detail on value-related questions.

Coles (1989) advocated listening well to a person’s story before attempting to fit their words, or the researcher’s conclusions, into any conceptual or theoretical box, for in this way fresh insights can emerge. This suggestion, echoed by Forester (1999), is closer to the grounded theory approach, in which meaning, and often subsequently theory, emerge from an analysis of data (Charmez, 1990; Corbin & Strauss, 1997; Gillespie & Gillespie, 2006; Glaser, 1992; Glaser & Strauss, 1967; Strauss & Corbin, 1990, 1994, 1998).

Clandinen and Connelly (2000) pointed to educator John Dewey (1968) as an inspiration for their thinking that narrative inquiry may be useful in considering the role of the narrative in transformational learning. They wrote, “For Dewey, experience is both personal and social. Both ... are always present. People are individuals and need to be understood as such, but they are not understood only as individuals. They are in relation always in a social context” (p. 2). This observation makes this researcher’s choice of narrative research methods an especially good fit in the present study, which seeks to better understand both the personal and societal aspects of relationships between mothers and FDC coaches. While not as straightforward to collect and analyze as data collected through positivist methods such as survey research or randomized trial, narrative inquiry can reveal a depth of experience and meaning (Denzin & Lincoln, 1998, 2005; Lincoln & Cannella, 2004).

Data Collection

When the researcher arrived at the pre-arranged interview site, she wore simple clothes such as one might wear to the grocery store. She greeted the person who had arranged for the interviews to take place, referred to here as the “host.” The host usually greeted the researcher, showed her into a room where interviews could take place, returned with the coach who had been randomly selected to be interviewed. The researcher introduced herself, thanked the coach for agreeing to be interviewed, then reviewed the informed consent form and asked the coach if she had questions. Few mothers had questions, but when a mother did ask questions, these were answered. The coach then signed the Informed Consent form. The researcher gave the coach a copy.

The researcher interviewed the coach, using the following questions as a spring board. Prior to the interviews, the researcher had developed these questions based on the literature review, but regarded these as ways to begin and fuel the narrative interviews, not as a formal interview schedule. The goal was to engage the coach, and then each associated mother, in separate narrative interviews designed to prompt stories that could provide insight into the research questions. The first two questions were usually enough to spark in-depth stories. The remaining questions were primarily used if stories lagged, or if the researcher had questions about the initial stories.

Coach Questions

1. What was happening in _____'s life when you started working together?
2. Please describe the work you did together.
3. What was this mother's major goal?
4. What barriers, if any, did she encounter?
5. Please describe a memorable time in working with _____?
6. Is there anything else you'd like to tell me about working with _____?
7. What kinds of goals do families who come to your agency hope to achieve?
8. How old are you?
9. How would you describe your cultural background?
10. What is the last grade, diploma, or degree you finished?
11. How would you rate your family's income: Not enough... just enough... enough with a little extra... plenty?

Mother Questions

1. What was happening in your life at the time you started working with (coach)?
2. Please describe what happened in your work with (coach).
3. What were some things that (coach) did or said that were helpful or not helpful?
4. Please describe your major goal and some of the steps you and _____ worked on together to achieve it?

5. What barriers, if any, did you encounter?
6. What do you imagine your life will be like in five years? Why?
7. Is there anything else you'd like to tell me about how working with ?
8. How old are you?
9. How would you describe your cultural background?
10. What is the last grade, diploma, or degree you finished?
11. How would you rate your family's income: Not enough... just enough... enough with a little extra... plenty?
12. How do you think it will be in five years? Why?

In some cases, the researcher traveled with a colleague who handled the informed consent form and, where necessary, provided child care while the researcher interviewed the mother. The interviews took place during a sweltering summer. The researcher offered each mother fruit juice, a paper cup, and a napkin. The researcher conducted all interviews herself.

In each mother interview, once the researcher and mother were sitting alone in the interview room, the researcher turned on the tape recorder, did a quick sound check, then said, "Thank you for letting me talk with you today. What was happening in your life when you started working with (name of credentialed coach)?"

The first mother interview was with "Dorothy," who replied,

The day I had my breakdown, my husband had just left to drive truck. On our anniversary. What a day! I was going to gas my house and all four of us. I was going to close off the living room so it was like I guess airtight. I don't know exactly what I was thinking. And I was going to turn on the space heater and just let the propane fill the room. I was going to sit down and read a book—with all four of us in there—me and my kids. I knew that when I turned up the gas, we would all die. I was thinking that it was easier than living in fear of Jimmy being sick. That it would be easier for them and myself, because they were seeing my husband and I fight you know it was so rough.

The researcher's response was to silently set aside the intended questions so she could instead follow the thread of Dorothy's disclosure. The researcher replied, "What a day! You thought it would be best to end it all?" The researcher reached across the small table and touched Dorothy's hand for a moment, saying, "I'm glad you're here," ready to withdraw it immediately should Dorothy recoil or give any other sign of discomfort. Instead, Dorothy leaned across the table toward the researcher, then continued her story, providing details.

The researcher listened to Dorothy's story, interrupting only to ask for clarification. As Dorothy's story ventured into more everyday turf, such as the challenges of raising young children, the researcher lightly offered commiseration and connection such as, "I have two children myself," while still allowing the story to remain Dorothy's.

When the researcher noticed the life-and-death tone of Dorothy's story moving toward safer ground, the researcher began to weave some of her intended questions into the conversation. Each time she left space for Dorothy's response, then followed Dorothy's lead. At the end of the interview, the researcher thanked Dorothy, took her hand for a moment, saying, "I've learned so much from you. I have a lot of respect for you. I hope you and your family have a good summer." Dorothy nodded and ventured a smile. The researcher stood up, then walked toward the door. Dorothy followed. They walked together into the narrow hallway of the family center, which was decorated with brightly colored children's paintings. There they were greeted by the host and the next mother to be interviewed. The host said, "This is [mother's name]."

Although a bit drained from the previous interview, the researcher smiled at the next mother, saying, “Thank you for coming. I’m happy to meet you.”

The next mother turned out to be Dorothy’s cousin—“cousins somehow,” the host noted. While this at first struck the researcher as surprising, given the random selection process, the researcher understood that in a rural case load it was not improbable that Dorothy’s cousin, also a client of the family development agency, could also be randomly selected.

The researcher’s colleague had handled this Informed Consent form while Dorothy was being interviewed, so the researcher was able to do a quick sound check, then settle quickly into the interview. The researcher asked, “What was happening in your life at the time you started working with (coach’s name)?” This mother began by telling her part of the incident Dorothy had just told, then moved into talking about her own experiences with her coach. The researcher employed similar interview methods in the other rural sites, as well as in the inner city sites, where she added negotiating the potentially dangerous inner-city interview landscapes with heightened safety awareness, including the more formal courtesy of calling the homeless shelter guard “Sir.”

A key to successful narrative interviews is to strike a balance between preparation and an on-the-spot willingness to adapt when a story begins to emerge. Presence—the ability to be fully focused on what the interviewee conveys both verbally and in nonverbal communication—is more important in narrative interviews than in more formal research methods, which follow a prescribed protocol requiring few judgment calls. Narrative interviewing also calls for a researcher with enough life

experience not to be unnerved by stories of violence, extreme poverty, suicide, and intended murder. Narrative researchers can benefit from establishing a relationship with a counselor or other professional with whom they can debrief following troubling interviews.

Data Analysis

Narrative analysis is holistic, in that it considers the meaning of whole stories (Kvale, 1996; Mishler, 1986; Riessman, 1993). Additionally, this researcher also used the lens of “portraiture,” a methodology developed by Lawrence-Lightfoot and Davis (1997). Portraiture is especially suitable for the analysis and presentation of narrative data because it combines the direct words of research participants with contextual descriptions.

Forester, Peters, and Hittleman (2005), Peters, Gregoire, and Hittleman (2004), Peters, Jordan, Adamek, and Alter (2005), and Peters, O’Connell, Alter, and Jack (2006) pioneered methods of developing “practitioner profiles” based on narrative interviews with community education practitioners and using those profiles to inform practice and theory. Forester et al. (2005) wrote,

We use profiles to explore the challenges and opportunities that practitioners face in our fields. Like other narrative and ethnographic material, profiles provide phenomenologically rich qualitative data that can be corroborated by existing literature from our fields. Sensitively analyzed, profiles facilitate theory-building because these practice stories can help us clarify theoretical problems in our fields.... We analyze profiles to see what the people we interview can teach us about the work in their field. What lessons do they provide? What surprises, difficulties or challenges do they present? What do these practitioners face and what do we learn about what’s possible to do? What did they learn and what can we learn from this?
(<http://instruct1.cit.cornell.edu/courses/practicestories>, accessed December 14)

Forester et al. used “practitioner” to describe Cooperative Extension agents and other professional community educators.

Profile Pairs

The current study extends the meaning of “practitioner” in two ways. First, it includes *paraprofessional* home visitors trained and credentialed by the Cornell FDC program. Perhaps more significantly, it extends the format of the practitioner profile into a “profile pair” drawn from separate interviews with the practitioner and her client. While this profile pair focuses on narrative data from the coach and mother, it adds narration from the researcher to increase this new genre’s accessibility and includes the researcher’s analysis.

Including data from both the mother and the coach potentially increases validity—or as it is known in narrative research, trustworthiness—through triangulation (Clandinen & Connelly, 2000; Riessman, 1993). It also provides another relevant lens through which to understand the practitioner’s practice. This study used these methods to develop eight profile pairs consisting of a credentialed worker (the practitioner) and a mother whom she coaches; such pairing not only provided a useful data set for the study, but also strengthened the validity of each person’s narrative.

Once interviews were transcribed, this researcher read each transcription, then followed recommendations of practitioner profile expert Dr. Scott Peters (2007, 2008) to step back and ask, What is going on here? What are the central stories of these narratives? What can be learned from these stories about the research questions? The researcher selected approximately four of the most compelling whole stories from each interview, searching for stories that revealed something new about the family

development process or vividly illustrated societal issues. She dived beneath the surface of the stories told, searching for ambiguities, contradictions, and uncertainties in the stories. Hearing the same story from the separate vantage points of both the mother and the coach helped uncover these ambiguities. In her analysis, the researcher considered not only what could be learned from the stories of each mother or coach, but also by their paired stories. In addition, the researcher looked across profile pairs within each geographic setting (rural, urban), and also contrasted data from the two geographic settings.

Mothers and coaches were remarkably generous in the depth and breadth of stories they told the researcher. In the interest of readability, the researcher left a great deal of data on the “cutting room floor,” deleting countless “umms, you knows,” and repetitions within interviews. Often, as mothers or coaches told their stories, they wove back and forth in a nonlinear way that rendered their stories difficult to follow. In these cases, the researcher rearranged the story’s elements into a beginning, middle, and end to make it easier to follow. This was done without omitting key information, or adding anything beyond necessary connectors such as “then.” A few mothers—particularly those whose experiences were traumatic—told stories so lengthy and repetitive that the researcher edited out repetitions of essentially the same stories being repeated for emphasis (or perhaps as a way for the mother to work through her trauma).

After the researcher developed each profile pair, she set them aside, went to the wilderness to gain a fresh perspective, then reread each profile pair and whittled it further. The researcher then shared one prototype profile pair—that of Dorothy Smith and Jill Wood—with practitioner profile expert Dr. Scott Peters, who offered

insightful suggestions on structuring this and subsequent profile pairs. After following his recommendations, the researcher next shared the entire research report, including all eight profile pairs, with colleagues familiar with narrative methodology, profile methodology, and societal issues affecting families. These colleagues used the Microsoft Word Track Changes option to offer suggestions and queries, which the researcher either incorporated or, in a few cases, refuted.

Although the researcher initially framed the study within the conceptual frameworks of human ecology and parental empowerment, when the data revealed issues that could not be explained by either of these theories, the researcher moved conceptually further afield for explanations, diving into the literature of the additional conceptual framework of transformative learning, including its debates, then searching for potential interfaces within the three theories to explain the data.

Validity Issues

Potential threats to validity exist in this study. The first is this researcher's dual role as researcher and as director of the Family Development Credential program. While this role facilitates access to research sites and respondents, it also provides a potential bias that could negatively affect validity. The researcher mitigated this threat in two ways. The first was deliberately taking a skeptical stance, not assuming that the interviews would reveal positive data, or any particular data. The researcher hoped she would be surprised by new insights. A second way of mitigating the researcher's dual role was to request feedback on the draft research report from researchers with no vested interest in the FDC program, then follow their feedback.

Another potential threat to validity could have occurred had the respondent pool been composed of mothers and coaches with similar views. The researcher mitigated this threat by conducting interviews in two geographically and culturally different sites—New York City and a rural area of New York State. According to Hamilton (2008), such research in markedly different sites introduces “external validity” or generalizability by including a larger range of communities, organizations, and people than could a single site or even two similar ones. Thus, the sites were selected nonrandomly by the researcher on the basis of the following criteria: (1) location in the FDC state with the longest-standing state FDC program (New York); (2) within that state, the existence of fully developed FDC programs with experienced instructors and credentialed workers; and (3) the ability and willingness of workers and mothers to participate in research.

Because the researcher recognized that this initial site selection could potentially introduce bias, within these sites she randomly selected coaches to ensure a wider range of programs, coaches, and mothers than, for example, the commonly used selection technique of a convenience sample. This ensured that the researcher conducted interviews with a diverse sample of mothers, as well as coaches in the FDC program. For example, the researcher conducted interviews in a New York City homeless shelter and in an isolated rural health center, the parking lot of which included an area for horses and buggies. The third bias-mitigation method was to send interview transcripts to those interviewed, asking them to review the transcripts for accuracy.

Another threat to validity lies in misinterpretation, or limited interpretation, of respondents' narratives. The researcher sought to reduce this potential problem in two ways. The first was through the newly developed research method of profile pairs, which couple the profile of the mother and the worker who coaches her. This procedure could provide two independent perspectives on the same relationship, thereby highlighting differences in recollection and interpretation without, of course, determining which perspective is correct. Knowing that the mother and the coach view something differently or identically has been useful to both the researcher and the ultimate readers of the profile pairs.

Ethical Issues

Respondents' rights were protected through voluntary participation, the informed consent process, and confidentiality protection. The primary potential ethical breach within this study was lack of confidentiality, which has been adequately dealt with by asking each interview respondent to select a pseudonym. Thus, pseudonyms have been used throughout all handling and reporting of interview data. All interview data were stored in a locked file cabinet to prevent unauthorized access. The researcher acknowledges that one threat to confidentiality in in-depth interviews, especially narrative interviews, is that people in the participants' communities—even the participants themselves—will recognize them. However, as explained above, the researcher took great care to mask mothers' and workers' identities, as well as the location of the rural site (New York City being large enough to afford a substantial measure of anonymity).

Qualitative inquiry, and particularly narrative inquiry, poses an extra ethical issue. Whose stories are these? Narrative research methods are inherently constructivist (Fosnot, 1996; Seidman, 1998); that is, they are a joint construction between the researcher and the storyteller. While various researchers locate themselves in different places along a continuum of shared ownership of data, this researcher honors the mother's or coach's life as her own but sees the interpretation of their stories as having two phases. In the first phase, when the researcher sent the transcript back to the interviewee for comment, there was a shared interpretation. In the second phase of developing profiles, the researcher held the responsibility both for ethical safeguards and for interpretation. It would have been possible for this researcher to share the profiles with respondents, reserving the right to interpretation but remaining open to such interpretation if it had differed from that of the researcher. This additional step was not built into this study due to the cost and logistical difficulties of recontacting respondents, many of whom appeared to live in unstable housing and could, therefore, be difficult to locate.

Chapter 6: Presentation and Analysis of Profile Pairs

Eight Profile Pairs: Rural and Urban with Analysis

In an effort to incorporate the contextual issues Bronfenbrenner's (1979) theory considered essential to understanding human development, as well as examine how the current study might address criticisms that Mezirow's (1979b) theory of transformative learning lacked adequate attention to contextual issues, especially for women's development, each narrative that follows incorporates relevant contextual issues.

The following section provides eight profile pairs, followed by the researcher's analysis of each pair. Each profile pair is titled with the names of the mother (or, in a few cases, great-grandmother, grandmother, uncle, or father) first, followed by the name of her or his credentialed worker (coach). The title is followed by a subtitle that this researcher ascribed to that profile pair, drawn from a notable phrase from that interview. The names of family members and coaches are culturally appropriate pseudonyms selected by the person interviewed. Identifying characteristics and place names have been altered while retaining the narrative's meaning. Each profile pair opens with a short overview, followed by quotes from the interview with the mother or other key family member, then comments drawn from the interview with her credentialed family worker. Each concludes with an analysis by the researcher, arranged according to the Research Questions presented in chapter 4.

The following profile pairs are included here:

Rural Profile Pairs

- Jessica Cooper (mother) and Sue Trank (coach): "Always chaos!"

- Brenda Jones (Great Grandmother) and Julia Roberts (coach): “I didn’t want [my great-grandchildren] in foster care.”
- Dorothy Smith (mother) and Jill Wood (coach): “The problems kind of tumble-weeded.”
- Lynn Kennedy (mother) and Mercedes Benz (coach): “Now that I’m away from him I can focus.”

Urban Profile Pairs

- Godfrey King (uncle) and Ekemini Eno (coach): “Not coming in to fix him, but to assist us in what we need to do”
- Mary Seacole (grandmother) and Tracey Thomas (coach): “Before I met Ms. Thomas, I was ready to give up.”
- Haja Kamara (mother) and Ms. Doumbia (coach): “The police in Harlem do a very, very good job.”
- Christina Lopez (mother) and Rudolfo Signe (father) and Sympa Crima (coach): “Starting family life in a homeless shelter”

Rural Profile Pairs

Jessica (Mother) and Sue (Coach): Four Boys under Age 7—“Always chaos!”

Jessica Cooper describes her situation:

We have four boys, so it was always busy, always chaos, and the three-year-old was just *very* busy! We were having some behavior issues with him. My husband and I were arguing with each other so we just said, “Okay, we need some help here.” Amy at the Department of Social Services suggested Sue. She has helped a lot with all the information she has, and even just to come in and say, “You’re doing fine.” I think that was the biggest help, very reassuring. Our boys are close in age—8, 6, 4, and 17 months.

The first couple of years (after we had children) I worked 4:00 p.m. to midnight; then when our oldest started kindergarten, I switched to part-time during the day. Once the kids were in school and involved in baseball and swimming, it was just too much. Finally, my husband was able to switch jobs, not work nights anymore. He's a welder. He was able to go to a different company and absolutely loves it. I was able to stay home, which is what we wanted until I started staying home. Then I said, "Oh my gosh, I think I have to go back to work!" [My staying home] was different for the kids because they always had their dad home with them when I worked evenings in a residential program with developmentally disabled adults, when my husband worked nights. [Our kids] were used to having him home all the time. It was just chaos. When Sue came in it ... just kind of calmed it down (chuckle).

From (my work with) Sue I've learned that I have a lot more patience than I thought. The last time she came Bobby threw a whopping temper tantrum. She said to me, "You have the patience of a saint. I don't think I could do that." Because ... my husband's work hours are so crazy and this time of year he could be working until 11:00 or 12:00 at night, I really don't know when he'll be back. He always calls to let me know.

I've learned that I really need to take more time for myself! We just kind of [find time to relax] whenever he is home, if he has a couple of hours. Like today we're going to meet him at work and take the kids out on the lake, then drop him back off at work. And when he does come home [sometimes I'll take] a hot bath or something. So it's not anything scheduled. Just when you can get it.

"Sue Made the Difference"

When [Sue's] coming was suggested to us, all we were told was she's an outreach worker, which at the time really didn't mean anything to us. We didn't know what we were getting into. Right from the first day she came it was very comfortable. She makes it very easy to sit down and talk with her. That is really important because if you don't feel comfortable enough to tell her what's really going on, it is really kind of a waste of time. It's really working out well now. Sue made the difference. She just has a lot of information. Like right now, our four-year-old was just diagnosed with ADHD [Attention Deficit Hyperactivity Disorder]. I knew my husband was diagnosed with it when he was younger. And I knew that Bobby just wasn't quite like our other three boys. So Sue was able to help me. She said, "You know, you can get help through the school district now that he is four." She just had so much information, things that I wouldn't have known about. So now we are working on preschools for Bobby. We want him to have that full year of preschool before he starts kindergarten. Something other than, you know, "Let's just sit down and color." The [rural] school district area that we're in doesn't have

things like [the county seat], so we're working on it. If we were in [place name] that would be great. That is the school I went to too.

Bobby's ADHD Running the Household: "Our biggest 'Aha!'"

When Bobby totally falls apart with his temper tantrums, I'm glad Sue's here. You know, she just kind of sits back and observes. She has come when I've had, like, four loads of laundry stacked up on the couch and we just kind of kick them off.... It's really good to have her come. I don't know how long she will be coming. We just kind of take it every couple of weeks at a time and see what's going on. [Sue started coming] maybe around November. It's like one thing right after another, and now we have a meeting with our school district to discuss what we need to do for Bobby with this diagnosis, because we really don't want to go to medication ... at all [because he is so young]. Sue is going to attend that meeting with me, which is really nice, because my husband is not going....

He could get the day off but he is really kind of closed-minded about the whole ADHD diagnosis. He had it when he was young, and his family didn't deal with it real well. So he's just trying to take it one step at a time. He has only met Sue once because he is always at work. But just from me telling him, "Oh, Sue was here today and this is what happened, and Bobby did this," he's glad that she comes. He doesn't discourage it, not at all.

I think he sees her coming [as] reassuring, you know, saying, "No, you're not crazy, you are doing this right." He sees that it really helps me feel better to have her be that reassuring person and say, "Okay, let's try it this way." It really has been a bit of help to our family. You know I always just keep saying, "Bobby, Bobby, Bobby." I mean the other two boys are in school and the youngest one is just 17 months old.

Bobby was really kind of running the whole household and still is in a sense, but when she started coming, that was really our biggest "Aha!" My husband and I were like, "What is going on with him? Are we doing something wrong? We don't know what's happening." Sue gave us suggestions. You know, a lot of the stuff we've already done. We've already tried but a lot of times [it helps] just to have her say, "That is right and keep trying." It's nice when she comes and does the, um, ASQ's [Ages and Stages Inventory]. We enjoy Sue coming so much. I mean, sometimes she comes and the house is a wreck and I am still in my pajamas and she doesn't care.

Resistance from the School: "An Attitude of 'Oh, You Guys are Young Parents'"

But the school where we have a kindergartener and a 2nd grader, a lot of times when we go to different functions at the school we get an attitude of, "Oh, you

guys are young parents, you really don't know what you're talking about." The school doesn't treat us like Sue treats us. You know, she came in and said, "This is my name and this is what we are going to do, and how do you feel, and what is going on in your life?" By now, the school district sees that we have four kids and they know that I worked in the healthcare field and so it's getting better, but ... even from the very beginning Sue wasn't judgmental.

I think her main goal was just to try to get a handle on Bobby's behaviors. He certainly isn't a bad little boy but just very, um, demanding and challenging. So our main goal was to make sure that we weren't doing anything wrong—that we weren't traumatizing this child in some way—and just to make sure that we were headed down the right road.

I feel like we've met those goals now. Sue confirmed that we were doing it right, and [that] kids don't come with a book. But it's been really nice that she's been there because now we are dealing with the whole ADHD in preschool children and I'm not really sure what this is going to bring on. Our school district very much likes to push the medication, even in the younger kids.

We were able to take Bobby to [name of school] and have them do a report.... [The] school district had [said] that anybody who can give them information about Bobby can attend [the scheduled upcoming meeting], and that's why I asked Sue if she would be willing to [attend] because she's there and she knows. And she has seen it, so she'll go to that meeting with us. We don't know what's around the corner. We have a follow-up meeting with, um, the preschool special education committee. I believe that's how they worded it. Just to kind of touch base with the school district and say, "This next year Bobby will be coming—so look out!"

I don't know really what the next steps are after that. I guess [we'll] just take it one day at a time and see what happens with him and what he'll need. It was really nice to know after his testing that he wasn't delayed in any area. Unfortunately, that made it so he couldn't go to [name of school].... But Sue just really helps us to say, "Here's an option." She's mentioned to us about different summer day camps that she was going to check into for the older boys.

It really helps that she tries to come every two weeks. Probably 90 percent of the time we end up rescheduling the original date, because with four kids it's crazy. Somebody's either sick or has appointments. But it's nice to have her there so the next thing that comes up I can say, "Okay Sue, this is what's going on." We've built a trust that when something new comes up you can just go right to that.

I was at a point that I just really wasn't sure if what I was doing was the right thing. And if we ask her something that she's not sure [about] or she doesn't know, um, she'll call [back] within two or three days and say, "I've checked with so-and-so and this is what we found out." She always gets back to me.

Great Landlord, Employer "Like Family," but Still Juggling Bills

Jessica and her husband have avoided frequent moves—a source a chaos that plagues many families living on low incomes—through a rent-to-own arrangement on their rural house trailer and land. Yet, paying bills is still hard on her husband's income.

We rent our trailer and land. We're deciding right now if we want to own the property that we're on right now. We've lived there for several years and our landlord is great, every time that we make that monthly rent payment it comes off the mortgage. So anytime that we decided to buy it [the cost] is going to be a lot smaller than it was two years ago. We're trying to decide if we want to stay there and eventually start building.

Sue has talked with us about Habitat for Humanity and a lot of stuff that makes us think, "Okay, maybe we can do this." It's cramped with the four boys but we have a lot of land ... almost six acres. This time of year isn't so bad but wintertime I think everybody is about ready to kill each other. We are up on this great big hill, so in the wintertime, if the roads are bad, we don't go far at all! Last winter wasn't so bad, but the winter before, [the fuel bills were] really [bad]. So Sue brought us information about the weatherization program, and she just has so much information that, like I said, we wouldn't have known it was even out there.

We have a phone, [but we haven't been able to pay our bill,] so right now we can't call long distance [and most calls in this rural area are long distance]. But Sue knows that so she calls me. She asks, "How's everything going?" She always calls the day she's going to come just make sure we're still set for that time and, um, wants to know if I had any questions or if I needed anything.

Right now [June], we're still trying to catch up with last winter's heating bills. Financially, it was a change to have just one person working, but [with] four boys and babysitter costs, we really weren't getting anywhere with both of us working either. We manage, and we budget. We try. Can you really budget with four kids?

We don't have a bank account with that extra [money in case] something happens, [such as] a vehicle breaks down. One of the first bills, if we have to let something go, [is] the telephone because it is not a necessity. You know, we'd rather pay the heating bill and the electricity. We're lucky that the company he works for is a very small company. His boss will often say, "Well, jeez, ... let me pay that for you and we'll take it out of your next couple of checks." He's very understanding. I don't think we would be managing that well without the company my husband works for.

They really appreciate my husband, and it's like an extended family. It doesn't seem like a place of employment. This afternoon, the kids are getting off the bus at the new place my husband's boss and wife got on the lake. We are experimenting with the kids getting off the bus there this afternoon, so they can hop on the boat. So that's how we manage.

Finishing High School after Having Children

Jessica's goals have shifted from herself to her children and her husband's education.

I used to have goals for myself., but now it's mostly about the children. When I had my job, my main goal was to finish school. I did get my GED and started taking some college courses ... but having kids I didn't ever finish it. I want to go to school for psychology. We were hoping that once I started staying home from work I would be able to do that. Unfortunately, it hasn't worked out that way yet. But Bobby starts school in another year and then we'll just have the youngest one home. So I think that could be a long-term goal.

When I was still in high school, I moved to [place name] with family and finished school there. I took my junior and senior year together. I was madly in love, so I came back and I wasn't able to take the final exams in New York State because I didn't complete the last quarter here. I was out of state and then, um, I had Fred after that. I just kind of let [my goal of finishing school] go.

I guess I thought to myself, "Well I completed my senior year. You know, what's that piece of paper really?" I was 18 when I had Fred. But I found out later that I really would like to have that piece of paper!

When I first started working at the home for developmentally delayed adults, they required a GED or high school diploma. I was able to get the job anyway and had been working with them for about a year and a half. My house manager said, "We still don't have that on file for you." I said, "All right. I've

just got to go do it.” And actually I just found out that there was a test in [place name] that day. I was 10 minutes late for it, walked in, and said, “Can I take this test?” I ... passed the GED test just like that! Lucky for me, two people didn’t show up; that’s the only reason that I got to take it. I had to do it, for work. After I did, I realized I scored pretty well. I thought, “Why didn’t I do this a long time ago?”

My husband, he took GED classes because he didn’t finish school. He moved to Florida with a whole bunch of friends and they were going to go do something or another on the ocean. But he took classes upon classes upon classes and still hasn’t taken that GED [test]. I think he’s afraid he won’t pass it. Like I said, he’s a welder, in the water, and he’s always kind of wanted to pursue this deep-sea welding underwater.... It’s very dangerous.

When he was still in high school, his teachers told him, “You really should pursue it. You could go into the Navy.” Now the Navy actually contracts out for other people to do it because it’s so dangerous. So that’s the reason we’ve been looking into it. [My husband] did find a trade school in New Jersey, [where he] can complete the program in five months as opposed to two years. We really can’t just all pack up and move at this point. And New Jersey is close enough that on weekends he could drive back.... We don’t know if it’s exactly what he wants to do. But that’s a step in that direction.

His company also has some stuff going in New Jersey, so they may be able to, you know, put those two things together and have him still working. We don’t know. It is all up in the air right now but I know that it’s something he would really like to do. I felt like maybe I was held back from completing school because we had the kids and my job was to take care of them and be there for him. I don’t want him to feel like that. I want him to feel like if he wants to go away for five months and complete this, I think that would be so good for him. But he is going to have to get that GED [first]. We’re talking about it and I said, “You know, just go and take the test and see what happens. You took your classes.”

“We Were Both Too Stubborn!”

We’ve been together for a long time. When Sue started coming, we were like, “Okay, our kids aren’t listening to us and we’re arguing; can we make this work?” We’ve since learned that couples do argue! Now we just kind of laugh at each other and walk away.

A lot of times we hear someone say, “Oh, how many kids do you have?” and we’ll say, “four,” and then the question that’s most asked of me is, “Are they all by the same father?” [chuckle]. I guess in this day and age it’s very uncommon. We have really hung in there! I think a lot of it. We laugh

about it and say, “Well, that’s just because everybody told us that we couldn’t do it and we were both too stubborn.... We’ll show you!”

I’m Catholic and he’s not any religion at all. He wasn’t ever taught anything about it when he was growing up. So now he’s asking questions. We were married in my Catholic church, which he really wasn’t thrilled about at first, but we have a lot of the same parenting goals and values and morals. I think we got it from our grandparents because they were very much alike. But sometimes I wonder, “How did we do this? How do we have these four boys that are so smart and do so well in school and they may not behave at home but at least when they go out somewhere they [are] so well behaved and polite. I guess I would rather have them misbehaving at home and doing well outside.

I think, when Sue started coming ... we were at a point in our life that we were just learning that it isn't all roses all the time. His family, as well as mine, really aren't good role models. Their marriages were broken and they didn't parent the way that they should have at all. Either one of our families.

Looking Back: Foster Care, Grandparents Get Custody, Meeting Her Husband

Both my husband and I ended up not living with our parents [while growing up]. I think I had just turned 12 when I was taken to a foster home because my mom got remarried and my stepdad was horrible. That night he lost his temper, I was wiping the kitchen table off. [He] pushed me and I hit my face on the edge of the table. There wasn't ongoing physical abuse, just a lot of screaming and hollering. I guess in a way I was kind of glad that had happened because that gave me [a reason to get] out of the home.

My brother and sister were allowed to stay home but my stepfather actually fractured a bone in my face, so I was taken to a foster home for about a year and a half. When I first was taken there it was kind of like a, a sigh of relief because I wasn't going to have to be with my stepdad anymore. My mom just kind of turned her back, kept her mouth shut.

The night that it had happened I went to bed and woke up the next morning. My parents said we were moving to the [place name] school district. They made a comment to me, um, that it was going to be one of my last days of school at my school, to turn in all my books and not to go to my cheerleading competition that evening because we would be moving. My mom made a comment something about home schooling and I don't think she ever would have followed through with it. But all I could think of to myself at that time was, “We’re going to move and nobody is going to know what’s going on.”

I woke up that morning and very quietly snuck out of the house, headed to school. Before I made it down to the bus stop, my boyfriend, who had lived in a foster home right near where we lived since he was a baby, his older sister was driving by when I came out of our house with this swollen-up huge face and bruising. She didn't even let me get to the bus stop. She was older, in her twenties. She took me to their house, which was a foster home, and said, "Okay, you guys got to do something about this!" Then it was just police cars and social workers and we had to go to the hospital, of course, to have x-rays. My stepdad was angry that I had this boyfriend.... [Although] we were young [and] neither one of us drove, we weren't unsupervised anywhere, but he didn't like him because of the long hair and the earrings. His foster parents always invited me there, you know, for dinner or whatever. I think they thought it was better for us to be over there than out someplace. I was 12 or 13. He was 14, a little bit older. We weren't dating. We weren't boyfriend and girlfriend. But my parents were just very overbearing. Years later, I found that my stepdad had been doing cocaine, which probably explained a lot of his behavior. That just wasn't like my mom at all.

The foster home I was taken to was really horrible. The foster mother ... had a serious drinking problem. [Years later] all the kids were taken out of her foster home. When I went to the foster home my grandparents came to pick me up. We had to go to court, of course, because charges were pressed. My stepdad pretty much just plead guilty, I think. He was made to take parenting classes and all this other stuff. I never had to testify. When my grandfather took me to court, he picked up one of my closest friends for me to have as moral support. Then my grandparents started looking into getting custody of me. They pretty much raised us anyway. [Even though] they were close to retirement age, I moved in with them. Eventually they got custody of me.

By the time we got everything with the courts taken care of, it was right before school started. I had to change schools. I was starting my 10th grade. It was horrible, not an easy school district to move into. My grandparents were just great. I was allowed to go places and hang out with friends and not get grilled when I came in. They said, "Okay, now you live with us and you have all of our trust until you break it." It just continued like that.

That's actually how I met my husband. My grandparents lived near his family. He lived with his grandparents because, like I said, he was diagnosed with ADHD and his mom [said], "I can't deal with him." His grandparents took him in.

A couple of years went by and it was just kind of tough to have my stepdad have no contact at all. You know, they would come up to my grandparents' house for family functions and he would stay behind because I was there. I have a younger brother and sister and an even younger brother that

the two of them had, just a baby at the time. We kind of just ignored it for a long time. He stills thinks he was in the right and insists that he didn't do it but, um, it really makes you realize what drugs can do to a person. He got clean. He was made to. I was really surprised that my mom was with him, but I think when they got married she didn't realize the situation with him, because she's not like that at all.

After I lived with my grandparents, I moved to Carolina because my grandmother got real sick. I had an aunt and some cousins in Carolina and was pursuing a nursing career. They had a really good school there, so I moved there and completed my junior and senior year of high school and then came back because I was so in love with Jerry [giggle]. And everybody said, "Oh, you guys won't last." We did make it work. And I'm really happy that we did. [Long after we were married and had kids,] we realized we had actually met each other when we were little kids. We found out that our parents went to school together, and our grandparents went to school together.

With my stepfather, it's all fine now. We just don't say much about it. My husband doesn't like my stepfather very much, but now he and my mother take our boys sometimes and it's fine.

Looking to the Future

We are hoping that we will be a lot more financially comfortable [in five years] than what we are now. ... Not that we are not financially stable but it's not real comfortable. Of course, the kids always come first, so they always have everything that they need, so it's Jerry and I that [will] say, "Jeez, we really need new clothes but the kids needed new clothes first." So, we are hoping. That's why he wants to pursue this deep-sea welding career. We are doing pretty well the way things are right now.

Family Worker Sue Trank

Sue described her work with Jessica and Jerry Cooper and their boys, and the incident and family situation that brought them together:

I got a referral from CPS [Child Protective Services]. An incident was reported, and the CPS report was founded because the children were in the home, not in the room but in the home, sleeping. The mom got angry and hit a glass window in a china cabinet. So I'm working with this family who has four boys [who are] 8, 7, 4, and 18 months [old]. The mom and dad are pretty young.

[A strength in this family] is that the dad works, and works really hard. He got this job, and he has kept it. It sounded like he had been floating a bit

from job to job before I got the referral, but it has been about seven months now. He likes his job. He likes his boss. And his boss likes the family. It sounds like a really good match.

Jessica is a very busy woman. When I went for my first visit, I noticed that her four-year-old was very active, jumping off the furniture. If I was paying attention to Jessica and not speaking to him, he would stand directly in front of my face to get my attention. She had concerns about how active and difficult he was. She is stressed out a lot. So I think that she knew [he had a problem, but] she just didn't know what [it was] or [was] afraid of what it might be.

Her husband was diagnosed with Attention Deficit Hyperactive [Disorder] as a young child and she said he is still on the go. [Similarly, her four-year-old] wouldn't sit in time out. Jessica was using his bedroom for time out, so I suggested not to use the bedroom for that because he was having a hard time going to bed at night also. And to be more persistent with him. Sometimes parents don't know how persistent they have to be. When I went back she said, "Things are a little bit better but not too much better." I told her, "When I say 'persistent,' sometimes it's exhausting. You know it is more exhausting for you than for him because you just have to keep at it. It is hard work. It is always so much easier to give in." She moved time out to the kitchen chair. He would get out of the chair and smile at her, knowing darn well he should stay there. He has been a challenge. We talked about taking time for herself when dad came home from work. Maybe to take a walk or a hot bath or something along that line.

When I first started working with this family, Dad wasn't ready to have an evaluation done to see if the four-year-old had ADHD. He didn't want his child labeled. Recently, he agreed to the evaluation, so I gave Jessica the school phone number for the CSE person. Their four-year-old is going to be evaluated at [school name] for Special Needs. I have met the dad twice when he was at home. He's a construction worker, so he works long hours and is not home a lot. When he does get home, he and the boys are busy together. So he doesn't see that the little boy is really active.

There is a lot with the four-year-old. They also have a younger child who is [acting out] what he has learned from his brother, so he is starting to be a little more aggressive at 18 months. He is starting to push people or [tries] to rip my papers away from me, and I think that is just part of his older brother's [influence]. That is what he sees all day long, you know, and that is what he is feeling. Someone pulling at him or pushing at him....

This mom's main goal, right from the start, was to get this evaluation done for the four-year-old. Now that's been accomplished. I just talked to her

yesterday and she let me know about the evaluation. They suggested put him in a structured preschool program. Her school district does not have one, but I suggested she call her church to see if they would pay for him to go the preschool program at [saint's name]. I am also going to call the school and just see what they are going to offer, if anything, because he does have a special need, although he is not delayed. Jessica definitely wants to figure out what is going to happen in the fall with this little guy.

If this family hadn't ended up with a Family Development agency, I don't think that this mom would take the initiative to make the phone calls or even to know who to call. This family was already in the CPS system; that's why they were referred to me. If they hadn't been referred to my agency, I think this mom's stress levels would [have] stayed really, really high.

I fear that this child wouldn't have an evaluation done at all. He has no delays now, but I fear that there could have been delays if he [had] stayed home for another year and [not learned] how to sit in a seat. If he can't do that he can't go to school, or they are going to want to medicate him. [Because he ended up in our agency instead,] that is not something the doctors are looking at right now. The person that did the evaluation said, "Let's not medicate him because there are no delays, but [for him] to sit down for any long period of time it is going to be a challenge."

And you know, if they had not had a family development worker I think they would have had more confrontation in the CPS investigation because of lack of understanding why she is so stressed out at the end of the day, you know, needing time for herself. I don't know that they would be able to talk about that [with the CPS worker]. That is difficult to deal with—a child that [can be] active all day and then be a happy camper when the rest of the family comes home at night. So [without the intervention of a family development-oriented agency,] there might have been more reports, because [Jessica and her husband] just wouldn't know who to turn to.

Jessica used to work and now she doesn't work outside the home. So I think that is another change for her. When dad was floating a little bit between jobs, she was the one that had that solid job and was going to work every day. She worked with developmentally disabled adults. So now that she has a founded CPS case, she can't work with children [professionally]. Or [with] anyone, [including] adults....She has just written a letter to the state to see if she can't have some kind of release or I don't know what, because now ... she can't work with children [professionally]. So that closes a lot of her job possibilities.

Analysis

What is going on in this profile pair? What can be learned? This profile pair vividly portrays the formidable barriers and challenges Jessica encountered as she pursued her goals of a strong marriage, greater financial stability, and getting her young son tested for Attention Deficit Hyperactivity Disorder (ADHD). On a daily basis, Jessica faced managing on an irregular income, the relentless stress of living with a hyperactive child, and job opportunities limited both by the rural location and her own and her husband's low education. The story that Jessica did not tell, but which Sue did, was of the too-stressful day that ended in someone (perhaps even Jessica or her husband) calling Child Protective Services (CPS). Jessica told the researcher only that she and her husband had been arguing so realized they needed some help, and that "Amy at the Department of Social Services suggested Sue." Sue describes the incident more fully: "An incident was reported, and the CPS report was founded because the children were in the home, sleeping. The mom got angry and hit a glass window in a china cabinet."

This incongruity in Jessica's and Sue's description of the same incident is significant, particularly when combined with the fact that they nevertheless developed a mutually respectful and productive relationship. Jessica and several other mothers interviewed by the researcher praised their credentialed coach for not being judgmental. Jessica contrasted this to her children's school teachers, whom she said considered her and her husband too young to be parents.

What methods did Sue use to help Jessica overcome barriers and challenges? She appears to have followed the steps she learned in the Family Development course

(Forest, 2003). Although they met under the challenging circumstance of a founded child-protection case, Jessica credits Sue for her accepting attitude and wealth of information. Sue formed a mutually respectful relationship with Jessica, helped her articulate her own goals and the steps she needed to take to reach them, and provided information and encouragement. Clearly, Sue had excellent communication skills, and the ability to distinguish what was important—such as getting Bobby tested—from less important issues like laundry piled on the couch. When Jessica suggested unusual goals, such as encouraging her husband to pursue deep-sea welding, Sue refrained from imposing more conventional views. When Sue lacks an immediate answer to Jessica's questions, she searches out more information, then gets back to her.

For Jessica, Sue's arrival in her family's life brought stability in the face of chaos, and encouragement in a world where few people believed in this family. Clearly, this family's relationship with Sue has positive meaning and significance, almost like an older, more experienced and knowledgeable sister or friend, but without the negative aspects that clouded Jessica's own family relationships.

When Sue met this family as the result of a founded CPS investigation, it would have been easy to take a punitive stance, but instead she used an empowerment approach to help this family use their strengths to accomplish their goals. In addition to the concrete steps toward helping Jessica reach her goals including testing and a preschool referral for the "very busy" young son, Sue also recognized the importance of Jessica taking care of herself, even as she cared for her challenging family, so a future CPS incident would be less likely. Sue advised Jessica to take time for herself when she can. Even a walk or hot bath could reduce her stress.

This Profile Pair demonstrates that the relationship between family and credentialed coach can help the family overcome formidable challenges and barriers. It also shows the ways in which both mother and coach find this relationship meaningful and significant and how this relationship empowers the mother. Let us return to Cochran's (1988) definition of parental empowerment:

We propose that positive changes in self-perception (Stage I) permit the alteration of relations with members of the household or immediate family (Stage II), which is followed by the establishment and maintenance of new relations with more distant relatives and friends (Stage III). Stage IV is seen as information gathering related to broader community involvement, followed in Stage V by change-oriented community action. (p. 164)

Through her work with Sue, Jessica's self-perception changed from a former abused child and foster child, to a dedicated young wife and mother, proud of having held her marriage together despite predictions of failure. This altered self-perception, together with her positive relationship with Sue, appeared instrumental in Jessica's altered relation with her husband, in which Jessica convinced him to allow their son to be tested for ADHD. This altered self-perception may also have been a factor in Jessica's ability to form a positive relationship with her husband's employer and his wife, as well as healing her strained relationship with her own father. Sue helped Jessica gather "information related to broader community involvement," such as that with her children's school—despite her sense of teachers' initial perceptions that she and her husband were too young to be good parents. Although Jessica laughs that she has to toss loads of laundry off the couch when her home visitor Sue arrives, Jessica's offhanded comment contains a much bigger reality: this family not only has a couch and laundry facilities, but also a reliable home; a stay-at-home mom; an involved,

employed dad who comes home every night; transportation; and a routine that includes doing laundry, caring for their four busy boys, and (presumably) providing and preparing food for their six-person family.

Had their youngster already been enrolled in preschool—thus providing Jessica with some respite from her isolated, challenging daily life —this stressed-out mom might have been less likely to lose her temper after the children were asleep, breaking a window in a china cabinet. That act brought Sue’s welcome visits and the ADHD testing Jessica needed, but also a “founded” designation from Child Protective Services, which means that Jessica is unlikely to ever get her old job back. Good employment opportunities such as a state job working with developmentally disabled adults (and which probably carried health insurance and retirement benefits) are rare in an isolated rural area. Sue summarizes, “That closes a lot of her job possibilities.”

Without this black mark on her record, in a few years when the youngest child entered school, Jessica could have returned to her former job or possibly pursued her dreams of going to college. As it stands now, there is little incentive for Jessica and Jerry to limit the future size of their family. Without the pull of returning to her job or a realistic possibility of completing college (which she expressed a wish to do) or a history of limiting the size of their family, Jessica, like many young mothers living in poverty, might magnify her isolation and financial challenges by drifting into having more babies.

Jessica’s worldview is circumscribed by the rural region in which she lives, yet she is unwittingly profoundly limited by Federal policies. Had Jessica lived a quarter century earlier, during the AFCD era, she would likely have been eligible for college

tuition benefits and associated child care programs. In other words, her dreams of a college education could have come to fruition. Today, TANF, the federal program that replaced AFCD, replaced a focus on education with a focus on getting a job—any job.

While the relationship between Jessica and Sue has been clearly empowering, there also appeared to be a transformative aspect in this relationship that bears closer examination. This transformative facet includes the disorienting dilemma described by Mezirow (1991)—in this case, Jessica’s founded CPS case and subsequent introduction to Sue. The precipitating CPS situation forced Jessica to reexamine her life. The relationship between Jessica and Sue also appears to include the process of perspective transformation (Mezirow, 1978b), during which Jessica, with Sue’s coaching, began to critically reexamine the personal and cultural assumptions she had regarding her life. Until the CPS report, Jessica seemed to assume that hard work and frugality alone would help her and her husband overcome their limited situation, handle their young son’s relentless “busyness,” and forge an overall healthier family life than she experienced in her own youth.

Following the founded CPS report and Sue’s subsequent coaching, Jessica could “no longer comfortably deal with the anomalies of a new situation” (Mezirow, 1977, p. 157). No matter how hard she and her husband worked, and regardless of how carefully she scrimped or how skillfully she worked to contain and guide her hyperactive youngster’s chaos, the situation was not working. With Sue’s arrival and the subsequent developmental work, a transformation occurred in this family’s life. Jessica not only set and pursued goals (which would not necessarily signal transformation), but also began to reflect on her own and her husband’s unfavorable

early family experiences, as well as their current situation and future prospects.

Although she certainly did not use Mezirow's academic terminology, Jessica began to consider how her personal and cultural assumptions had shaped her life and were now impacting her family. She articulated how she wanted her current and future life to be better than her own fragmented childhood, in which her stepfather's loss of self-control in a stressful moment resulted in a CPS call and her subsequent placement in foster care. She also recalled how her husband's apparent ADHD as a teenager caused his frustrated parents to send him to foster care.

As a result of her current CPS case, Jessica's own children could readily have ended up in foster care, repeating the cycle she dreaded. Instead, Jessica and Jerry's children stayed at home with Sue's welcome frequent visits. Ironically and perhaps unfairly, Jessica's previous request for help with her hyperactive preschooler had not resulted in any assistance, but once CPS decided the family needed help, Sue was dispatched to this home. Sue helped to stabilize the family, asked Jessica about her goals, and helped Jessica reach her first goal of obtaining the ADHD testing and preschool placement that had previously eluded her, thus helping Jessica effect change in her own and her family's life.

Jessica's story played itself out within the context of rural poverty. She could not afford reliable phone service or transportation and therefore spent all of each day in relative isolation in a drafty rented trailer with her young children, including one with ADHD. The rural region in which she has lived continues to have limited job and housing opportunities. Yet, this rural culture also has its plusses. Jessica and Jerry's life is enriched by the traditional rural values of her husband's generous boss, who

occasionally pays their rent then takes it out of Jerry's next pay check—an informal kind of credit that helps them avoid predatory loans from strangers or credit card companies who lack any personal interest in the family's well-being.

For Jessica, Sue's arrival in her family's life brought stability in the face of chaos, and encouragement in a world where few people believed in this family. Jessica reflected that Sue's presence was reassuring and calming. As very young parents emerging from a history of their own negative family and foster care experiences, Jessica and her husband were accustomed to people questioning their abilities. Sue, however, recognized and reinforced their strengths. She reinforced positive influences in this family's life, such as their relationship with Jerry's boss. She also formed a positive-enough relationship with Jessica's husband that he overcame his deep-rooted negative experiences enough to allow his child to be tested for ADHD.

Clearly, this family's relationship with Sue has positive meaning and significance, and they see her almost as an older, more experienced, and knowledgeable sister or friend, but without the negative aspects that clouded Jessica's own family relationships.

Brenda (Great-Grandmother) and Julia (Coach): “I Didn't Want [My Great-Grandchildren] In Foster Care”

Brenda, a great-grandmother, explained the complex family problem that led to her being introduced to her credentialed coach, Julia:

My husband and I are raising our great grandchildren. I'm 65; he's 66. The children were about to get put in foster homes. My daughter Lori called me from California where she and the kids (who are her grandchildren) were living, and asked me if I would take the kids. I didn't want them in foster care.

My great grandson came right out and told my daughter he knew they could live with us. He knew we would go to bat for him.

Lori has four children. Her oldest daughter is the mother of these children. When Bob was born, Lori took over custody of him. She wouldn't let his mother, Sally, take care of that baby at all! That was Lori's baby, she was going to take care of it! Then when Adam came along, Lori says, "Well, I raised one of your kids; I am not raising another one." So Sally had Adam for the two years of his life, you know, the bond was there. He was always a mama's boy when his mother was around. No one dared do anything to him when she was there. But then Lori took him.

Lori got divorced from her husband, but I don't really think she ever got over him. Out in California she got mixed up with drugs. The area she was living is called the drug capital of California. Pot. Cocaine. She did all kinds of drugs. She would smoke the stuff but she never got into the shooting up. [During one of my earlier visits to her in California,] I went through a spell with CPS [Child Protective Services] which totally turned me against CPS. When I turned a complaint in about my daughter mistreating Adam, they called her and told her they were coming out, instead of just going out and doing the investigation. So if Adam had any bruises on him, she shipped him off to his aunt's so when they came out he wasn't there. They never pursued any of it.

Dan Manipulated Lori and Molested Four-Year-Old Ally

When the kids were little, Lori was going with this guy Dan, on and off for years. I hated that man from the beginning and he knew it. He was accused of molesting Ally, right up until the time I got her. She told me that Dan touched her when they were in bed together. That is what brought this whole thing to a head—why I got them. They took her to Children's Hospital out in California. They said he fondled her and they had no evidence of penetration, but they said that is as bad because it always sticks in their mind. She was only four. That was what brought everything to a head. Lori says it never happened. She actually thought Ally was making it up. I says, "Lori, how can a four-year-old make up a story like that and tell you details?"

Lori just ignored Dan's mistreatment of Adam. No one ever did anything about that. I don't know if she just ignored it or if she didn't dare say anything. He manipulated Lori into whatever he wanted. The mind games he played on her were terrible! I hated that man with a passion, and still do.

I knew the children had to be taken care of [When I decided to go get them,] I hired a paralegal before I left here. I took the bus out. I got out there on a Tuesday, went to court Thursday and got temporary custody. In California there was a CPS worker that was trying to work out me [getting] the kids. She

believed me. I had told her we were coming out to get them. When I got out there I told her I had a court date. And she says, “Well we are going to give you this month’s check on the 1st so you will have money to transport them back to New York.” When I went there the CPS lady is telling me she thought it would be a good idea if Dan got custody of the children since he has been in their life for so long! She said, “No we are not giving you any help. We are going to fight this so Dan can have custody.” They did not want me taking them out of state. I ran her up one side and down the other. She’s going on and on, but the court had already given me permission! I just wanted to get them away from Dan as far as I could.

Crossing the Country in a Rental Car with Three Scared Children and Their

Detoxing Mom

When I got the kids, my daughter Lori came back with us. I rented a car. We came cross-country with three kids and an adult coming off of her drugs! The meanness. The things that she would say to me! She slept most of the time, but when she’d wake up she would get very belligerent. “I never should have gave you the kids, rah rah rah....” But after that, she’s never been back on them since. Her coming back here getting away from everybody she knew that had them.

No matter what Lori did to the kids, she never admitted she did anything wrong with raising them. She had Ally for four years—from the time she was born. Ally and the oldest one, Bob, did anything they wanted to. Because my daughter didn’t really care. They could boss Adam around and he had better do what they tell him to do or else he was the one that got the punishment.

Now Lori lives here. Dan is still in California. She did go out there when her last grandchild was born and she saw him at that time. And then he called here to the house a couple of times because her daughter Sally still has communication with him. Why, I don’t know! The mother of the kids, knowing what he did to them! I don’t know why she would have anything to do with him but they still do.

The thread running through this profile pair is the multigenerational intertwining of dysfunction and support. When Lori’s daughter Sally gave birth to her first child, Lori stepped in to raise him, causing her own mother, Brenda, to remark, “That was Lori’s baby.” By the time Sally had her second child, Lori was less eager to

“bail out” her daughter, so Sally raised Adam for two years before turning him over to Lori. By the time Sally’s third, Ally, came along, Lori was ensconced in a relationship with an abusive partner, Dan, who, according to Brenda, manipulated Lori, abused Adam, and sexually abused Ally. Dan’s sexual abuse of Ally was documented by a children’s hospital. When great-grandmother Brenda responded to her daughter’s plea for help, the younger two children were, according to Brenda, “drug babies.” These children simultaneously witnessed their great grandmother’s rescuing them from abuse and the likelihood of foster care, and their grandmother’s drug withdrawal, while being driven cross-country to a new home by their great grandmother. Brenda was parenting not only Sally’s three children (who had been largely raised by Lori), but also re-parenting her own daughter, Lori, as Lori got off drugs and established a home for herself and the children.

The entry of credentialed family worker Julia into this extended family’s life changed their long-standing dysfunctional patterns, while building on the family’s strengths.

Julia: Listening, Setting Up Counseling, “Giving Me the Support I Needed”

When we got the kids, she came out to the house and talked to us and started setting up programs and counseling, things like that, which was a big help. The counseling did a lot for them. She listened to what I had to say and gave me the support that I needed because there was days when I first got them that I just felt like screaming because I didn’t know how to control what they were doing and what to do to correct it.

Although Brenda was a dedicated, experienced parent, raising her great-grandchildren presented challenges she had not encountered with her own children.

When Julia first started coming, my major goal was to be able to handle the children, to do right for them because it had been years since we raised kids,

and these three all had problems. When my husband and I were raising our eight children, they were healthy. Now these kids, two of them are drug babies. You see the difference every day. Ally was upset when she went into 1st grade. She would wet herself rather than go to the bathroom by herself. In kindergarten the bathroom's right there. But [in 1st grade], when she had to go out in the hall to go to the bathroom by herself, she was so scared she would wet her pants (rather than go to the bathroom by herself.). I don't know if this had to do with what Dan did to her.

They don't comprehend what is going on around them. Adam repeated 1st grade. Ally repeated 1st grade. She doesn't understand things. Like, I told her to go into the trailer down at camp and I says, "Above the bed by the bathroom is my purse." She come out and goes, "Grandma, it's not there." I says, "Ally, it is above the bed." She doesn't know what the word "above" means. There are so many things that at her age she should know. Lori didn't want to admit that there was something wrong with her but now she is seeing it more because she has been taking them during the holidays.

Julia just being there is a big help, and I know if I had a problem I could call her for anything. I called her to talk about the kids' attitudes, or the different programs like my great grandson Bob didn't feel like he was getting anything out of going to counseling, so I called her and asked her what should I do. I did make him go a few more times, but he got to the point where he wouldn't even talk to them people.

Julia come out to the house one day just to see how things were going. She was like the backbone of the construction I needed when I first got the kids. She worked hard with me to get all this working, putting me in the right direction for help. If Julia hadn't come into my life then, I think I would probably be going out of my mind right now, but [instead] I learned to understand more about what the kids were going through. Some days it was very frustrating. There were days that I didn't know if I was going to make it through the day with them. When I first got them it was really hectic. But Julia was there. She gave me where to go, what to do. She helped me set up meetings at the school for Adam. She went to a couple of them with me, to see what they were planning on doing. I think any child in that situation has to have that structure about what we want him to accomplish. If I hadn't had Julia to help me, I really think the children wouldn't have gotten the help that they needed [without me] knowing what to do or where to go for the help.

Very Different than Raising Our Own Kids

It was very different than raising our own kids. Because Ally was allowed to do whatever she wanted and order Adam around. We had to break her of trying to control Adam all the time. Bob's big thing was he was so

protective of his brother and sister. We had to teach him that at his age he didn't have to watch out after them. That they were going to be safe with us. Do what kids do. We have had counseling for them, and I have grand parenting classes. I had counseling for Ally, counseling for Bob. I have talked a lot with Julia about different things for the kids.

The school is very happy that we have them, and happy with the kids. In fact, they have worked really hard to get Adam on a curriculum that they planned for him next year for his development. They will send me a whole write-out of what they plan, so I can give it to my daughter so she can take it to the school there. He is doing terrifically. They told me he has come out of his shell and is being more friendly with the kids and participating more.

It's been nearly three years now that I have been raising them. They're getting big. They are growing like weeds (chuckle). They're doing good. They go to school every day. Ally, the youngest, is 7, Adam will be 9, and Bob just turned 12.

We have a campsite at [named location] where we go during the summer. The kids want to be down there because they can swim all day long, ride their bikes, and go fishing. Adam loves to fish. That is the way I was raised, a very carefree life. My grandmother had a cottage. The kids, they just love it down there. They can't wait until they can go down there and stay down there all the time.

Sally Has Two More Babies

Since the kids have been with us, their mother, Sally, had two more babies. When Adam heard she was pregnant, he actually asked his mother, "Are you going to name any of them 'enough'?" He was eleven. [Soon after Adam] found out she was pregnant, she called one night to talk to the kids, he refused to talk to her. She says, "Can I talk to Adam?" and Ally goes, "Adam, mom wants you." He says, "Nope, I am going to bed." He would not talk to her. Never came to the phone at all. All of them said, "Why did she have two more babies [when] she couldn't even take care of us?" They just don't understand why their mother can keep having babies and not take care of them.

Ally Names Great-Grandma "Mother of the Year"

For Mother's Day, they had to write a "Mother of the Year" poem. And I will always keep this one because it says "I think my grandma Brenda should get the mother of the year award because she came to California and brought us back to New York where we were safe." When she gave it to me, I just sat there and cried.

When I had my first four children, my doctor said, “You were made to have kids and to be with kids.” I have always worked with kids. But now I think I’m getting too old for this. I’m 65 and my husband is 66. He has been retired for twenty years, since he had his stroke. Sometimes he has memory loss. And he has lost some strength in one side. But other than that, you know, the stroke didn’t affect him. Well, now he has other health problems. My kids told me, “Mom, you are getting too old for this.” I know I am. And it is getting to my husband, because of his health.

Lori’s Come A Long Way, Too

Brenda does not plan to raise her great grandchildren forever, although she does plan to remain in their lives. She told her daughter Lori that she needed to take the children back.

So this fall my daughter Lori—their grandmother—is going to take the children back. I have had a long way to come with her. There were times that she screamed at me because I told her she wasn’t getting the kids back until she straightened her life up. I says, “Lori, they will probably have you do the same thing that they had me do. Go to grand parenting classes, go to counseling.” I says, “When you can face the fact that you did wrong with these kids and admit it, that is a big step for you.” Now she will tell me that she has done wrong, she can face it. But it has taken a long time and a lot of heartache to make her understand this is something [she] brought on [herself].

Now we get along terrifically. If the kids say something out of the way to me she will tell them, “Don’t you talk that way to my parents.” She has come a long way in three years. A real long way. And no drugs.

She lives over in [named location]. She has a place of her own and she’s raising a handicapped grandchild. She just got the okay to get into a brand-new four-bedroom apartment they built for low income up there. [Since] she said she was going, I have been sending things of the kids’ home with her a little at a time. The kids will finish out the school year here with us, and then stay the summer with us. When they move, they will start in a different school in the fall.

Financially, it is just enough, I get \$248 a month for the two of the kids, and one of them is on social security, so I get \$300 from that. We feed them and clothe them and give them the things they need, but it takes out of our own to do it.

This was not what my husband and I thought we'd be doing at this point in our life, but, well, we raised a grandson too. I got him for the first time when he was five-and-a-half months old, then he went to live with his mother on and off. Now he is 19 and he just had a baby. So we raised him most of his life. My family is everything.

My transition was easy compared to what some of them are going through. I walked out of Welfare one day and there was a lady outside crying. I asked her what was wrong. She is raising her two granddaughters who are very rebellious against her. It was really getting to her, you know, so we sat and we talked, and after that I thought, "You know, I am really lucky with my grandchildren. They trust me."

Family Worker Julia Roberts

Julia recounted her work with Brenda and her family:

Brenda is a great-grandmother bringing up great-grandchildren who have behavioral and emotional challenges. She was at her wit's end and didn't know what to do. The kids weren't doing well in school, so the school referred her family to me to get support for the kids and to help with parenting.

My first meeting with Brenda was a school team meeting. The goal we worked on was support for her as a "grandparent." I referred her to a parenting group that is also a support group for grandparents, and gave her referrals about financial rights of grandparents. And we got glasses for one of the boys. Her initial goals were counseling for the three children and support for herself, a respite program so Grandma and Grandpa could get a break, and to enroll the children in an afterschool program.

The children's mom was in a very abusive relationship. And he abused the children. There was a little neglect. There was some drugs involved. Grandma and grandpa stepped in, or else the children would have been placed in foster care.

I developed a partnership with the family. That is an ongoing process. I go into the home weekly and listen to them. Not judge them. Not necessarily give them advice either. I am not a therapist, but listen to their strengths and weaknesses and point them out as we are talking, because sometimes they don't see their strengths. It was a strength that they were together. This grandmother, she has health problems and she is not a parent's age, her home is not huge, yet I felt it was a strength for her to take this on, and that the kids to want to be there.

Once she met her initial goals, her next goal was to get Bob testing and case management. Bob was having difficulties in school with his behaviors. It was impacting his academics. So we had a meeting with the school and figured out what his challenges and strengths were as far as school. And then we put some supports in for the school. We got an aide for Bob during transitions, and a teacher helping him after school with homework.

The next set of goals were [to] (1) develop communication with the school, (2) get some respite care for the children to give grandma a break, (3) help her with a discipline plan, and (4) [get] a referral to dental care for the three children. If they had not come to the program where I work, they wouldn't have had dental care, because they didn't know there was any dental care way out here for Medicaid people. It is very hard to find a dentist, or even a physician, who takes Medicaid out here. So we have a list of all the dentists and doctors that actually take Medicaid.

These children had cavities and their teeth needed cleaning. It had been a while since they had been to a dentist. And glasses. The youngest boy broke his glasses and they didn't have the money to get new ones, and Medicaid only paid for one pair a year. I found someone in the community who was willing to pay for glasses for this child. So we bought him a pair.

Brenda is a sweet lady. She followed through. She was open minded to all suggestions and referrals. She cared so much about the children that she wanted to do what was best. Even though she was kind of "old school," she opened up and did what she needed to do. She followed through with all the goals she had for herself.

I was in there weekly, giving her encouragement, reinforcing that she is doing a good job. I was a person she would just open up and talk to, and listen to her and giving her positive feedback.

Brenda went into the support group and did the parenting classes and we got everybody into counseling, everything was completed. So once completed, we had a team meeting for closing, and if the guardian is all set and doesn't have any more new goals and is okay with us closing out, then we go ahead and that is what we do.

At the time that I was brought in, Brenda was actually talking about having the kids live with another relative. I don't know if that would have been a good situation. Because of all the supports that we brought in, she kept them and still has them. She is very creative. I think with encouragement she has become stronger.

Analysis

What is going on in this profile pair? What can be learned here? This profile pair portrays barriers and challenges both within the family, and in the larger ecosystem within which they live. Drug abuse, intertwined with physical and sexual abuse of Brenda's great grandchildren, were the initial reasons credentialed coach Julia came into this family's life, but once she and Brenda began working together, related challenges with her granddaughter Lori became more apparent. The most egregious of Lori's problems—turning a blind eye to her boyfriend's abuse of her grandchildren—may be related not only to her drug addiction, but also to her confused role in the children's lives. Until her mother got the children and began working with Julia, this role confusion seemed to be repeating itself, unchecked, in Lori's relationship with the next generation. Dangerous challenges with the CPS system in California also arose when, according to Brenda, a caseworker regarded the children's alleged abuser as a suitable long-term caregiver.

Brenda and her husband—the children's great-grandparents—had health problems more typical of people their age than of younger parents. And, according to Brenda, they had limited income. Brenda's "old school" approach to child rearing appeared to be both a challenge and a strength: a challenge for her as she adjusted to the "drug babies" raised under very different circumstances than those in which she raised her own children, but also a strength, as she and her husband provided much-needed stability and safety for the children.

Julia appears to have employed the full scope of family development methods to help Brenda overcome these challenges. She began by developing a nonjudgmental

partnership with the family. Julia helped Brenda identify and work toward her own goals and then, when Brenda met her initial goals, move on to further ones. She recognized and reflected Brenda's strengths. She drew upon a vast knowledge of local resources, such as a counseling service, grand parenting class, and a dentist who would accept Medicaid payment. She worked skillfully with the children's school. When some of the resources she found did not work out as planned—such as the grandson's counseling—she refrained from pushing her own agenda. In fact, she let the family's agenda guide the whole process.

Brenda's was “at her wit's end” when Julia entered her life, which elevated the importance of the relationship. Brenda said that if Julia had not come into her life, she would be “going out of my mind right now.” Thus, Brenda perceived her relationship with FDC coach Julia as saving her sanity then standing by her, listening and referring her to vital services, as Brenda and her husband created a healthy, safe life for their great grandchildren.

Several aspects of this relationship appear to have empowered Brenda to set and reach her goals. Julia set the stage for this empowering connection by concentrating first on accepting Brenda and her situation nonjudgmentally, building the relationship, and finding out what Brenda's goals were. She supported Brenda's goals, refraining from imposing her own. This foundation, combined with Brenda's readiness to follow through with the knowledgeable suggestions Julia provided, proved key to Brenda's empowerment. With Julia's support, Brenda was able to break the intergenerational cycle of unhealthy relationships, eventually becoming

empowered enough to tell Lori that she needed to get her life together and resume raising the children.

Brenda's transformative learning began when the urgency of her great-grandchildren's danger came to light. She realized that her life-long responses of love, hard work, frugality, easygoing summers at the lake, giving and expecting courteous respect to authority—what Julia termed an “old school” approach to life—would not work when extracting her abused great-grandchildren from the dangerous life in which her daughter was raising them. Brenda reflected critically on the situation, realizing she would have to deal with a culture and systems beyond her experience. Next, she gathered her resources and headed to California. These resources included her own galvanized determination, advice from a local paralegal, a cross-country bus ticket, enough money to rent a car to bring the children back to her simple country home, and the support of her husband, whose life would also be turned upside down. With this maternal arsenal plus a California court awarding her temporary custody, Brenda was soon able to leave with the children. Although not part of her initial vision, Brenda also brought the children's “mother” (i.e., grandmother) back. Caring for children was second nature to Brenda, but handling her detoxing daughter as she drove across the country required Brenda to think and be in new ways, far beyond the cultural norms of an “old school” country grandmother.

When Brenda returned home and enrolled the children in school, with Julia's coaching Brenda began to reexamine how she wanted to relate with her daughter, Lori. Brenda told Lori that she could have the children back once she straightened out her own life. Brenda's strong new attitude, setting stringent standards before she was

willing to transfer the children to Lori, reflects a significantly different approach for Brenda. Through her work with Julia and related counseling and support groups, Brenda examined the personal and family patterns and decided which ones were healthy and which ones she needed to jettison or transform. She also was forced to take a hard look at the impacts of societal and cultural influences on her situation. Some were clearly negative, like the drug abuse that led to sexual abuse of her granddaughter, while others, like the rural culture that embraced leisurely summers at the lake, were positive. This transformative attitude—different from her long-standing pattern of bailing out her children under any circumstances—appeared to be instrumental in interrupting the multigenerational cycle of mother-daughter confusion regarding who was responsible for raising each new generation of children.

Brenda's positive relationship with Julia and the host of services she set up also set in motion transformative learning, but with an additional dimension that went beyond individual learning, into the community. Attending grandparenting class was transformative to this experienced great-grandmother, because it gave her insight that her previous experience was inadequate to raising "drug babies." For Brenda, learning how to be a responsible grandparent was not simply acquiring a new skill, such as learning to knit in addition to crocheting. Instead, raising her troubled great-grandchildren took Brenda into new territories and relationships within her family, community, cultural, economic, policy, and natural environments.

Although she had presumably been familiar with the local schools from her years of raising her own children and the grandson she raised earlier, she now returned to that environment in a new way that involved the wider community through

counseling, the welfare system, and needing gratis dental care. And, not only does Brenda appear to have been transformed by this process, but she also influenced others through her contributions. Outside the welfare office—a venue in which this hardworking proud grandmother would have been unlikely to find herself if not for her grandchildren’s sudden arrival in her life—Brenda consoled another grandmother whose plight was even worse.

The natural environment of her family’s simple lake-front camp provided a setting in which she and the children could regroup and grow during their far-reaching healing process. In this safe familiar setting, Brenda also experienced transformation when she reexamined her long-held assumptions about child rearing and child development when faced with her grandchildren’s unfamiliar “drug baby” developmental patterns.

Dorothy (Mother) and Jill (Coach): “The Problems Kind of Tumble-Weeded”

Dorothy Smith, a wife and mother of three children, began her story with a description of her thought process when her life went awry:

The day I had my breakdown, my husband had just left to drive truck. On our anniversary. What a day! I was going to gas my house and all four of us. I was going to close off the living room so it was like I guess airtight. I don’t know exactly what I was thinking. And I was going to turn on the space heater and just let the propane fill the room. I was going to sit down and read a book—with all four of us in there—me and my kids. I knew that when I turned up the gas, we would all die. I was thinking that it was easier than living in fear of Jimmy being sick. That it would be easier for them and myself, because they were seeing my husband and I fight you know it was so rough.

Like many men in rural areas with slim job prospects, Dorothy’s husband was thousands of miles away driving an eighteen wheeler when problems overwhelmed

her. Dorothy reflects on the intertwining societal, family, and personal circumstances that led to her breakdown:

It started out when Jimmy was a baby. We had three kids, eight, three, and Jimmy, who got a respiratory virus and had to be on a respirator. While I was in the hospital with him, I lost too much time from my job as a receptionist so I got fired. Then my husband went to truck driving school, so there was no money. We got food stamps. As soon as [he] finished, he was on the road most of the time.

And I was just nothing but a mess. My kids were begging me to play with them but I'm doing nothing but sleeping because I'm so depressed. I just felt like at that point it was going to be easier for them and me to [end it all]. I didn't know if [things were] going to get better, not so much Jimmy's illness but it was really the money and I was suffering from what they call Post Traumatic Stress Syndrome because of Jimmy's illness, and the depression. It was overwhelming. Nobody gave me a break. The problem kind of tumbled-weeded. I closed us all up for like a year. I didn't let nobody inside. It was hard to go anywhere, I didn't want Jimmy to get sick again.

To Dorothy, life seemed so hopeless that she decided to gather her three children with her and end all of their lives. Yet some reserve within propelled her into positive action despite her depression, saving her life and her children's, and bringing Jill into their lives:

That day, when I visualized shutting us all in and turning up the gas, I knew that wasn't my normal self. So I called my cousin. While I was talking to her I felt it come on and then leave— a definite chemical imbalance. I felt the change in my brain. My cousin called her family worker Jill, who came right over. CPS came out and that shocked me because I didn't realize I was putting my kids in danger just by thinking it. They put me in the hospital for four days and called Ben home from truck-driving school. They started me on medication and let me go home, and now they pretty much watch me closely.

One of the factors that brought Dorothy to the brink of despair was her perception that her parents-in-law molested her son, and a neighbor molesting her daughter:

I think my eight-year-old son was molested by his grandparents, my husband's mom and dad. (Jill and I) are working on that. There's so much. And my

daughter was just molested three months ago by the neighbor.

Jill's manner "stuck out in [Dorothy's] mind" as different from others who'd tried to help her, partly because of her ability to be steadfast—"a rock," in Jill's own words.

Dorothy described Jill's upbeat manner that first day:

The day I met her, it was still a time when I didn't want to associate with people. Her and another lady from this organization stuck out in my mind because they came in and they were just so flamboyant or bubbly and welcoming. They had a lot of life!

Taking Jimmy Out for a "Nature Walk"? "No way!"

Dorothy described her overprotection of her son Jimmy as keeping him "in a bubble":

I confined Jimmy to his crib. If he was sick, that's where he stayed because I was so afraid that if he ran around he was going to end up on a respirator. So if he wasn't in the crib he was confined to the living room. Until I met Jill, Jimmy very, very rarely went outdoors. He was sixteen months old. Now one of my goals was getting Jimmy out. That one's pretty much met.

At first I was still fighting taking him out, but with Jill it happened just like that. In January she told me we need to get him outside and do a nature walk and I'm like, "No way!" I still wasn't ready. And then February, March, he had pneumonia four times. So it was rough, but all of a sudden the weather broke and I just said, "Okay," we took him out once for 15 minutes and he wheezed so bad I was like, "That's it, I'm not taking him outside." And then we saw Dr. Andrews who told me I was shirking my responsibility as a parent by letting Jimmy manipulate me into not doing the nebulizer properly. Jimmy was running the show, and Dr. Andrews said, "You know it's your responsibility to teach him that he needs that medicine." That helped. Once we got that going really well, I started letting him outside a little bit at a time.

Dorothy switched to this new doctor that Jill helped her find "because he told me like it was." Dorothy said her young son "just took to Jill the minute he saw her":

When Jill and I took him outdoors for the first time, he went wild! He still says, "Outside, outside, outside!" See, because I kept him sort of hidden, you know I didn't take him around people, and the fact that he liked her right away was good. But now I take him out, let him run until he's wheezing. It's been good

for him. I didn't realize that that was an okay thing. When I kept him inside, I was trying to take good care of him, but now I know I was limiting his ability to get past the wheezing by himself. And now he's not doing a nebulizer all summer unless he gets sick."

Dorothy: Learning to Play with Her Children

Jill also helped Dorothy learn developmentally appropriate ways to play with her children:

Now that I'm working with Jill, there's stuff we're teaching Jimmy that I wouldn't have even thought to teach my kids. Stacking blocks, I just thought it was instinct that at a certain age they know how to do it. In the long run, Jimmy is probably going to end up the most advanced out of the three of them, although Jacob, my oldest, he is extremely inclined with the vocabulary. Way out there. Says words that people can't even believe that he can say. And Jessica, she's a go-getter. She's very outgoing and she comes to school here and she's just, it's made her, going through everything that she's gone through, watching me, I don't think it's affected her. And now Jimmy, he's strong all the way around. Funny, he was the one I was so worried about. And now we're teaching him all these things and he's just going to fly right, he's just going to start school ahead of the game.

Because when you're a first time parent and you don't know about these programs or you're not in an area that has these programs, or your income, which in our case at the time was above [eligibility guidelines]. When I still had my job, we couldn't get them into Head Start because of our income. I had no clue. No clue. And I don't know what I'd do without them going [to] the play group every other Friday. It's just wonderful. It's brought me out and gave me a new knowledge of what you should let your kids do.

A New Doctor

Soon, Dorothy's sixteen-month-old child, whom she had confined to his crib for most of his young life, was going outside. Once Dorothy and Jill began to work well together, Jill encouraged Dorothy to replace her ineffective doctor with an assertive one who "tells me how it is" and provides "constructive criticism." Dorothy contrasts her former "passive, nonchalant" doctor with the assertive doctor Jill helped her find.. Dorothy explained the positive effective of this switch on her family:

[Jill is] not one who lets me wallow in my fear. The first time we talked it was about starting to take Jimmy out of the house. That was one of the things we did together. That's when I realized, "Okay, I can't keep hiding Jimmy. I have to expose him to illnesses." I talked to the doctor about it. The first doctor wasn't too helpful, kind of nonchalant, didn't tell me I was wrong to be putting Jimmy in a bubble. Then Jill suggested we switch to another doctor because the other one was so passive and I'm the type of person that needs somebody to tell me how it is. Constructive criticism, so to speak, and that's what I count on. You know, I take that and make it better.

Setting and Reaching Goals

Dorothy described the process she and Jill use to set and work toward

Dorothy's goals:

Every time Jill comes, we go over my goals. My goals haven't changed; we're still working on them. To make sure that the money's coming in and I'm paying the bills. Now that my husband has a job, we don't get full food stamp benefits anymore. I run out [before the end of the month]; I have to spend my bill money on food. Then it's very hard to pay my bills.

In fact, we're dealing with that right now, trying to get everything caught up and it's hard. Our income would probably be enough if I knew how to budget. But I don't know the first thing about it. I handle money badly. I don't go out there and buy TVs and things like that. But when I have five dollars in my pocket, I don't pay attention to where it's going. So by the time I get home I don't know what happened to it.. My mom didn't teach me.

Now that's one of the things Jill and I are working on. And Jill helped me give my kids a routine. I just woke up and ... but then Jill got me a calendar. Now I am remembering things. I'm still not very good at it but I do write things down more. The kids know Tuesday's the day Jill comes. It just gives a little more [structure], they're excited about it.

Another goal was getting counseling for my older children. My daughter was molested by the neighbor. We're going to prosecute there. My son tells us what happened. I wanted to move, so my daughter doesn't have to go outside and worry about the man next door. But my husband says no, there's no possible way to do that except to create more stress we just need to deal with it. The man next door is being prosecuted. I filed a police report and they didn't do anything except go talk to him. It's his word against hers. Well, now she's in the counseling thing they have an investigator talk to her and then they prosecute through the DA office. I can't believe it all. It's been a crazy year. Even today, there's days when it's still hard.

Another goal, I'm hoping that by next summer I'm not relying on medication so much for myself, and I want Jimmy to be off the nebulizers. The doctor thinks it's realistic to a point. Winter, no. Summer, maybe. It just depends on how it goes. We got lucky this summer.

Driving a Truck: Home Four Days a Month

Jill commented that the job stress caused by Dorothy's husband's job as a long-distance truck driver was not unusual in this rural region:

It is not easy to find work around here, so her husband took up driving truck. He is gone a lot, so she has to handle everything. A lot of truck drivers are home every weekend but not when they first start.

Dorothy described her goals for a greater balance in Ben's job:

Having my husband home more often, we want to work towards that. Now that he has a job driving truck, he's home once every month for four days. The most awful part of my husband being gone so long is when he comes home, the house gets so disrupted. I feel so bad about that. He has a bad shoulder that won't let him drive local truck and do the lifting and stuff that he used to do.

Dorothy's husband considered Jill's home visits so significant that he schedules his limited time at home around them.

Substandard Housing: Mold "Just Creeps In"

Dorothy described the "awful" mold that "just creeps in," and the goal she set of getting it cleaned up, with Jill's guidance:

Another thing, we live in a trailer that's got mold in it. So that's actually another goal that we're working on, for [name of company] Housing to come in and clean it up. Jill arranged that. With mold, you don't even realize it's happening. It almost shows up overnight sometimes. It just creeps in. It's awful.

Dorothy's Dream Revisited

Through this narrative interview, Dorothy recalled the hopes and dreams she and her husband had when they first married, realizing how far afield their lives had

taken them from those happy dreams. She recognized the impact of economics on their problems. She understood how economic necessity had driven away their goals, to the point that her husband was seldom around to enjoy their life together, and when he was, it upset her fragile routine. Money was continually tight. But the biggest problem—perhaps the one that had tipped Dorothy over the edge—was the alleged sexual abuse of her children by their grandparents, who provided daily child care for the boy, and the abuse of Dorothy's daughter by a neighbor:

When we first got married we wanted kids, and to own a house you know. All the things everybody dreams big about. And we did that but we worked and worked and worked. And all we had was this house that we could barely pay for, we couldn't take our child anywhere, you know. We didn't do anything but sit in the house and worry about, "Okay, I'm working two jobs, you're working one, Jacob is going to Grandma and Grandpa's every day. We're not spending any time with him."

Now, I don't care about owning a house, I don't care about buying a new car, any of that. I care about being able to spend time with the kids. [My husband] had a warped sense of how it was supposed to be. I didn't grow up like that. He warped me and made me think that that's how it was supposed to be. He grew up ritzy, like materialistic things mattered. And now it doesn't but he can't do a job that allows him to be home, so he's out there making enough money to support the four of us—one, two, three, four of us.

Some days I feel like he's out there for the wrong reason-- money. But I can't work.. I'd like to be my normal self again, go back to work if I can. I don't know if I can handle it. When I think about work, now there's no way.

Family Worker Jill Wood tells of her experiences with Dorothy

Jill recalled the fateful day she was called to Dorothy's home, and how they established a working relationship:

I was Dorothy's cousin's family worker when I got a call. Cousins somehow. I went right over, and had to get a handle on the situation fast. It was delicate you know. If she hadn't called, I'm sure things would have gotten worse. She had locked herself and her children into a room and turned on the gas heater in there. So it could have been a deadly situation. She went to do it but just

stopped. She turned everything off, she called CPS and they came right out. It took a lot of strength for her to call. She got admitted into the hospital for a couple of days. Then I started coming to the home. Everyone was pretty shaken so I had to stay calm, be the rock.

Jill followed her training as a credentialed family worker, to build trust before attempting to introduce the topic of goal-setting. Once this trust was built, Dorothy began to tell more of her story to Jill. Jill recalled,

I think it was probably the third visit by the time I did bring the family plan out. Our visits are usually an hour and a half once a week but in this situation I could go more often, so by the third visit she was feeling a lot more comfortable with who I was. There was a lot of family workers and home visitors that came and went in that home. Home visitors don't make a lot of money so it's hard to keep a good car on the road. Family workers would get new jobs. So I think I was her third or fourth one. I knew she had been through some stressful situations with home visitors so I kind of treaded very lightly.

You know, once you build the trust, they tell you more about the situation, like with Dorothy, it started with this emergency hospitalization, getting the family stabilized, but then other things came out, a sexual abuse allegation against his parents, and then a neighbor molesting the daughter. So we're working on getting a prosecution, and an order of protection against the neighbor. And counseling. It's a lot for Dorothy.

Jill saw Dorothy's near-murder-suicide as a call for help from an insecure woman with low self-esteem, who didn't know how to ask for aid:

The children would have been removed from the home otherwise. I don't think CPS felt the children were safe with her alone, but after they interviewed Dad they felt the children were safe in that environment and Mom's willingness to [go to] the hospital for immediate care showed her strength that "I do need help." At that time she just couldn't ask for help. I think in the back of her mind she knew she could get that help, unfortunately going about it the wrong way. Because she couldn't just call somebody and say, "I need that help." This is a mom who can't ask for things. She is just afraid. I think she's insecure with herself, has low self esteem. She was at a breaking point and she just didn't know where to go from there. I think they found a chemical imbalance. I don't think she would be where she's at today without the support of myself and the other workers that have been helping her.

Jill reflected on the significance of that first visit, relating it to the FDC curriculum *Empowerment Skills for Family Workers* (Forest, 2003) guideline, which states that fostering mutual respect is the vital first step in building a working relationship with a family:

I was very respectful of this mom. Not scolding her, not saying what she should have did. I point out to her the safety of it, you know the health of the children. And I think when we do that parents understand it a lot better than just telling them it needs to be corrected. And I think that goes with having that bond with the families. I think if I didn't have that bond, that hot topic probably could have turned different. You know, if it was a new visitor coming in and mom didn't trust her, she may not have been as responsive. She is going through a lot emotionally and mentally. What brought us originally together was a child protective call. Where she tried to hurt herself and her children. Actually, she called me herself. Child Protective [Services] had recommended that she call me and with the encouragement of her cousin, so that's how we got hooked up together.

Among the many substories Dorothy told about what led to this crisis, Jill

honed in on what she believes led to this family's crisis:

I think the stress just got the best of her, stress from things that may have happened with her older child [who was] maybe sexually abused. So we now have him in counseling. That was a big step for Dorothy because they're looking at a family member that maybe did it. So this is very difficult. It has gone to a therapist now and once the information comes out in the therapist then they can take further action. Right now, because the child hasn't felt comfortable releasing any names, they can't do anything.

In her narrative, Jill linked one of Dorothy's goals—asking for help—with their work together, and with two recommendations from the FDC curriculum—fostering mutual respect and helping the family build a support network.

And that's one of the goals that her and I have begun to work on—asking for help. One of the families you're going to meet today is her relative. They're related cousin-wise somehow. She's a great support for her. [Dorothy's] got a lot of relatives around here. Well I have found my families are related to each other, so it gets a little confusing. But her cousin is really a good support for her and [together] we finally now got Dorothy to come to play groups. I do two

play groups a month. So she's built relationships with other families now where she just did not have that support, except her husband.

It has to be their decision for me to be here. Because if it's my decision they may not even welcome me in their home. They may not participate. I mean as far as family partnership plans, forget it. Absolutely not. It's got to be their decision to have me there. And I think it goes back to once again that bonding and building that relationship. If we can't bond, it's very hard to work with a family.

Being respectful is the key to my work. With all our families there's a lot of hot topics we come across. It's never just one thing. The first time, I wanted to build a bond with her. Usually I bring out my family partnership plan in the first little while, but this was different because I really wanted to get to know Dorothy and I wanted her to feel comfortable with me because if she doesn't feel comfortable with me, she's really not going to give me a lot of information [I] need. With this mom, at first, CPS was coming in and out, and I was setting up other appointments. The first visit, I brought Dorothy a calendar so she could keep track of when I'm coming, and her other appointments, and things at school, and when her husband comes home. It helps both mom and kids.

CPS recommended I come in weekly to help her with the stresses, teach her how to interact with her children. Her main goal is getting structure within her house. She's come a long way. Since I've been in there, Child Protective has closed the case as far as her harming her children. So that's been nice. And we also got a weekly visitor that comes in through the Parent Connection, who comes in to work weekly with the older child. Advice on discipline strategies, activities to do with him.

According to Jill,

There was so much going on in this family. Like getting a new doctor, one that would actually work with her and the baby. Out here it is not easy to find a doctor who takes Medicaid. And Dorothy used to work, a good job, before this baby, so she was not used to Medicaid and all.

Jill made her knowledge of doctors available to her clients and matched their ways of working with clients' personalities and needs. She also helped the mother complete and obtain approval of a new set of paperwork, and drove Dorothy and her children to the doctor's office. All of these and other actions were a testament to Jill's skill in

following the FDC curriculum's guideline that states that knowing community resources is key to helping families build effective support networks. This new doctor convinced Dorothy that she was "shirking her responsibility" if she didn't take Jimmy outside and make sure he followed his medical treatment. Jill added,

And getting Weatherization in to clean up the mold in her trailer. That is one of her goals. You have to apply for funding. It is not automatic. A lot of people around here live in old trailers. In the winter water leaks by the windows into the insulation, mildew, then mold. This agency that comes out and also helps with home improvements. It's based on income.

Now that I'm coming here, Dad makes sure he comes home when we have visits. He schedules them around that. It's wonderful, because first I met Dorothy, he was in training for his truck driving school. So when I met him, his enthusiasm of the program and his dedication to interacting with his child during visits was just wonderful.

I used to be a home visitor and a lot of dads, they show up but it's because they want to see what you're doing. So this dad is wonderful. I just recently met with him last Tuesday, he was home for a visit. And he was an active part right in there. What I like about him is he asks a lot of questions: "Where is my child developmentally?" "How can we introduce this activity to our child?" Very tuned in to making sure his child stays on track developmentally, and wanting to know what they can do to help him.

Jill: Keeping a "Mental Clear"

While Jill is the "rock" for Dorothy and the other mothers with whom she works, she also has her own family at home, so she tries to follow guidelines in the *Empowerment Skills for Family Workers* (Forest, 2003) chapter entitled "Taking Good Care of Yourself."

I think the one thing we need to remember as home visitors is taking care of ourselves first. It's very important that we don't carry our work home with us. We empower the parents the best that we can. I carry a caseload of 12 families. And really you know when you build and bond with that relationship, [you have to] make sure you draw that line that you don't cross into that personal relationship with families. But I'm professional. I think if you cross that

personal [line] you become more affected by everything that happens in their lives and then they're calling you at home, you know, so the job never ends.

When I leave work, I have a family of my own, a husband and two children. I have my hands full. I think keeping myself healthy, regular check ups, taking adequate time off, and I try to take time off that I don't have home visits on, so I'm not having to reschedule home visits and make them up. I try to just keep a mental clear.

Next week, I have two days off and then I have a week off. I think taking care of ourselves is important, because if we can't take care of ourselves, how can we encourage families to take care of themselves? I leave my personal life outside that door when I come here.

I have grown in that aspect, I know that I cannot bring whatever I'm going through personally into this work environment here because I need to be emotionally stable, alert, and tuned into my families as they call. Because they call me throughout the day. Something may happen, whether they need a food box or this or that, and I've got to be a strong, solid person for them, to get them where they need to go. And then when I leave, I pick up my own life. I think that's a challenge workers face. Because, if we come with so many issues and not being able to sort our lives out, it's difficult to try to encourage families we work with to sort and organize. So that's a fine line, if I'm going through it and can't figure it out, how can I help somebody else?

“There Is hope”

Although there is still important work ahead, Jill believes Dorothy has made significant progress during their time together:

Now Dorothy is doing so much better, and so is the whole family. They still have goals, like for dad to be home more, but Dorothy is stable, she plays with Jimmy and the other children, there is hope. Child Protective [Services] has closed the case as far as her harming her children..

Together, Dorothy, her husband, and Jill have turned a potentially deadly situation around.

Analysis

What is going on in this Profile Pair? What can be learned here? This profile pair describes a complex web of personal, family, and environmental challenges—

isolation in a moldy house trailer, neighborhood sexual abuse, alleged abuse by the children's grandfather, low income complicated by lack of budgeting prowess, the lack of local employment that prompted Dorothy's husband to get a job driving a truck long distances.

Signs of the area's limited resources were apparent when this researcher tried to buy a bottle of apple juice to provide refreshment on the hot summer day when narrative interviews were held at the friendly rural health center where Jill worked. The nearest supermarket was a 45-minute drive to the county seat; a 20-minute drive (the equivalent of a one-hour walk) led to a poorly stocked, dusty, overpriced one-room country store offering outdated milk, chocolate Ring-Dings, towering cases of Budweiser, but no fruit juice. Like many rural families, the Smiths live in substandard housing which negatively affects their health.

To help Dorothy overcome her problems, Jill appears to have followed the steps to family development (Forest, 2003). She seems to have quickly formed a nonjudgmental, reliable relationship with Dorothy and her family. She helped Dorothy identify her needs, strengths, and goals. Jill helped Dorothy formulate ideas for reaching her goals, then added some ideas of her own, like the snowy day Jill helped Dorothy bundle the baby in his snowsuit and get outside so fast that Dorothy's usual lethargy had no chance to set in. Once Jill began visiting, Dorothy was playing with her children in developmentally appropriate ways instead of being so overwhelmed that she planned to kill them along with herself.

Together they made a plan for working toward Dorothy's goal. At first, Jill handled many of the tasks (bringing a calendar, arranging appointments) but as they

worked together, Dorothy became stronger and carried more responsibility for her own empowerment. With Jill's fun but no-nonsense approach, Dorothy began playing with Jimmy and was soon getting him outside. Jill knew of a physician who accepted Medicaid and would speak frankly with Dorothy about her responsibilities to give Jimmy his medication and outdoor time each day. Another benefit of Jill's vast knowledge of local resources was that Dorothy learned to budget and began paying the family's bills on time, even though money was still tight.

Jill's knowledge of resources was also key as they worked together to get the mold problem in Dorothy's house trailer corrected. This blend of trust and knowledge of local resources was crucial as they worked to get counseling for Dorothy's older son, who was allegedly sexually molested by his paternal grandparents, as well as pursue prosecution should the counselor find a basis for the allegations. This same delicate balance was needed to pursue Dorothy's goal of prosecuting and placing legal constraints on a neighbor who allegedly sexually abused Dorothy's daughter.

To Dorothy, the significance of this relationship was literally life-saving, but also went beyond the emergency intervention provided by CPS: the relationship with Jill provided both a "rock" to steady her family and help them move toward a healthy, safe life, but also a buoyancy in the midst of their heavy issues. Her youngest son, kept "hidden" for the first year of life by Dorothy's fear, was ecstatic when Jill bundled him into his coat, sweeping him and his mother out for a nature walk. Dorothy appreciated that that her relationship with Jill offered more than services—it brought hopefulness and predictable order to her family's formerly barren existence.

Dorothy first described her breakdown in terms of her own psychological make-up: “I have anxiety issues to begin with but I just didn’t cope very well.” She went on to describe the societal and environmental issues affecting herself and her family, especially her husband’s difficulty finding local work, and the mold creeping into their trailer which may have been at the root of Jimmy’s respiratory problems, and which led to her losing her good job, as well as the alleged sexual abuse by grandparents and a neighbor.

Garbarino (1992a, 1992b, 1995) outlined the “socially toxic” conditions that make it hard for even the most dedicated parents to raise healthy children, including lack of parental employment opportunities, parents’ mental and physical health problems, substandard housing, chaos, and neighborhood violence. As Dorothy’s story unfolded, these conditions intertwined to build a socially toxic web that was difficult to escape. Jill was quicker than Dorothy to point toward the alleged sexual abuse of Dorothy’s older son by her husband’s parents as the primary cause of Dorothy’s breakdown:

I think the stress just got the best of her. And I think it goes back from things that may have happened with her older child, also ... with other people hurting him, we’re thinking maybe like sexually abused. ... That was a big step for Dorothy because they’re looking at a family member that [may have] done it. So this is very difficult. Actually, that has gone to a therapist now and once the information comes out in the therapist, then they can take further action. Right now, because the child hasn’t felt comfortable releasing any names ... they can’t do anything yet.

Bronfenbrenner (1979, 1986, 2001, 2005) used the term “human ecology” to describe the network of personal, familial, neighborhood, societal, and policy issues that support or constrain an individual’s development. This theory, and its progeny,

parental empowerment (Cochran, 1985, 1988), undergird the Cornell FDC program, which trained and credentialed Jill Wood to recognize the complex personal and societal interconnections affecting a family, and to work positively with the family's strengths. Dorothy, whose previous experiences with agency home visitors had not been particularly helpful, says Jill not only "had a lot of life," but "refused to let me to wallow in my fear."

If Jill's FDC-trained agency had not been available, it is likely that CPS would have handled Dorothy's dangerous situation in a more conventional manner focused on Dorothy's individual psychology and the children's immediate safety. As Jill suggested, the children probably would have been transferred to a foster home. This conventional approach delivered by overworked social workers would likely have given scant attention to the human ecology of Dorothy's situation—her husband's limited work possibilities and resulting long weeks away, the pernicious mold multiplying in their trailer, and limited choice in basic services such as medical care and grocery stores.

The circumstances that led to the relationship between Dorothy and her coach Jill were anything but empowering—Dorothy felt so hopeless she planned to kill herself and her children. Nevertheless, Jill guided the relationship through the steps and principles of family development (Forest, 2003, pp. 74–75). Jill first developed a mutually respectful partnership with Dorothy, her children and husband. This was especially challenging because of the circumstances that called Jill into their life. She helped Dorothy identify her goals; because Jill was brought into the picture by CPS, she also had to add to Dorothy's own goals the CPS goal of keeping the children safe.

Fortunately, this was also a goal of Dorothy's. In this process she helped Dorothy identify her strengths, which was especially important, since Dorothy had so recently thought the family's problems outweighed any of its strengths. Jill also helped Dorothy identify her needs, which included counseling related to her children's allegedly being sexually abused. As soon as Jill developed mutual trust with Dorothy, she helped Dorothy make a written plan for pursuing their goal, which involved using social services as stepping stones to reach their goals. As Dorothy and her family experienced stability and progress and developed skills needed to become self-reliant, they grew to need Dorothy less.

Jill followed the Family Development principle that all people and families have strengths. She did not dismiss Dorothy as someone who had nearly murdered her children and killed herself and was therefore too fragile to help. Instead, while Jill recognized the delicacy of the situation and level of care required, she treated Dorothy with a friendly, matter of fact respect. She considered Dorothy and her family as needing and deserving support. She did not assume they would always be dependent on public support. She looked for ways to help them develop and maintain a healthy interdependence with extended other people and their children's schools. Jill accepted that Dorothy's diversity—including her class, family form, and physical and mental abilities—were valuable. Jill also understood that the deficit approach, which requires families to show what is wrong in order to receive services, is counterproductive to helping them move toward self-reliance. She recognized that she alone could not help Dorothy's family, that the CPS and other agencies Dorothy worked with also needed to work with Dorothy from a strength perspective. Jill did not expect to resolve

Dorothy's problems for her. Jill knew this was a partnership in which they must share power.

Jill operationalized these family develop steps and principles in profoundly simple ways. Early in their work together, Jill offered Dorothy a calendar and introduced the idea of setting her own goals. While keeping a calendar and setting goals might seem a "given" to many professionals, it is important to recognize that these tools represented significant breakthroughs in Dorothy's and her children's lives. In the children's narrow world, their father was largely absent, their mother dangerously depressed, their neighbor sexually assaulting the older girl, their grandparents perhaps molesting one (or more) of them, overall chaos and money worries prevailed. Jill's arrival within the family circle brought hope, healthy connectedness, protection, and a sense of order to Dorothy and her children. Instead of existing in a depressed lethargy, their mother now played with them, looked forward to Jill's visits, and knew when school events were happening. Their father was coming home regularly. Before Jill began to help Dorothy set and pursue goals, the children apparently were continually exposed to experiencing or witnessing sexual abuse, and may have lived with continual fear about inadequate food, and that the electricity, heat, or phone would be shut off for nonpayment of utilities. Although their mother was physically present, she was, until Jill's arrival in the family circle, emotionally absent. Now, Dorothy has goals, pays the bills, plays with the children, and is taking steps to protect them.

Once her situation was safely stabilized, Dorothy was open to Jill's helping her critically reflect on the crisis:

That day, when I visualized shutting us all in and turning up the gas, I knew that wasn't my normal self. So I called my cousin, while I was talking to her, I felt it come on and then leave—a definite chemical imbalance.

As Dorothy worked with Jill, she realized she could no longer “hide” her sickly son away; she needed to become proactive in providing for his needs. Dorothy went on to reflect critically on her premarriage dreams (children, a house), all of which seemed normal but resulted in her and her husband working constantly, with little time to spend with their children. As a result of this critical reflection, Dorothy's dream—her psychological assumptions—changed. She no longer cared about owning a house or a fancy car; she simply wanted to play with her children and have her husband home more.

The relationship between Dorothy and Jill moved beyond individual transformative learning. It also transformed the systems beyond her immediate family. CPS's mandate is to keep children safe, remanding them to foster care if necessary. While keeping a watchful eye, CPS saw that the relationship with Jill was working so well that the children could safely remain at home. This represented a significant departure from common CPS practice. Dorothy's relationship with Jill also transformed how Dorothy interacted with the medical system. Instead of accepting her former pediatrician's *laissez-faire* advice, with Jill's help, Dorothy became proactive. More investigation is recommended into ways the relationship between Dorothy and Jill fostered transformative learning beyond the individual.

In conducting and reflecting on this study, a notable contradiction in the natural and human landscape of this rural area caught the researcher's eye. While driving to interview Dorothy and Jill and others in this rural area, the researcher saw

dilapidated trailers in yards strewn with cast-off toys and rusty vehicles, as well as well-kept farms and vegetable and flower gardens. Often, at first glance, the dilapidated trailers appeared empty, but upon closer inspection, the blue glow of a television or computer screen could be seen. Someone was likely inside, focused on a faraway life brought into their own life via the two-dimensional screen.

In marked contrast, the well-kept farms were abuzz with life—families lived, worked, and ate there, together. These families wore the distinctive clothing of Mennonites, a religious sect that shuns commercialism and many modern conveniences. In the morning coolness, the researcher noticed teenagers hoeing well-kept gardens, hanging clothes on the line, or bicycling between farms, while parents worked in the fields nearby. At noon, a multigenerational family gathered around a cedar picnic table under shady century-old maples, enjoying an abundant repast. The Mennonite farms exuded life and connection. This observation is not intended to glorify this way of life, which no doubt has its limitations, but to reflect on the contrast between that built-in connectedness and the toxic isolation experienced by Dorothy and several other mothers interviewed. The Family Development curriculum (Forest, 2003) teaches credentialed workers how to help families examine their social worlds, noting the systems in which there are already strengths, as well as those in which they can choose to build greater connectedness and support.

One wonders if Dorothy's near-tragedy might have been avoided if her husband had been able to earn a living in proximity to their home, instead of spending most of his time far away driving a truck. Ironically, the connection she did have—with her cousin—saved her and her children's lives. When a suicidal biochemical

imbalance hit Dorothy, she recognized it as abnormal and phoned her cousin, who contacted Jill.

Two remarkably distinct ways of life existed side-by-side in this rural region, yet largely separate. The parking lot of the health clinic at which the researcher interviewed Dorothy and other mothers contained a few dozen cars and pick-up trucks, plus one horse and buggy with a young man waiting in a shady corner. When the researcher left the clinic, she observed a very pregnant young Mennonite woman emerge alongside an older woman with similar features. They were both tenderly helped up into the waiting buggy by the young man who had waited with the horse and buggy.

Dorothy and the other mothers in this study were befriended by paid helpers such as Jill. Many of them also had friends or relatives, but as can be seen in the next profile pair, these friends often came with a mixture of support and undesirable drawbacks such as drug abuse.

Lynn (Mother) and Mercedes (Coach): “Now That I’m Away From Him I Can Focus”

Baby Coming Any Minute: Urgent Need for Medical Care and Transport

Lynn Kennedy was a young mother with two young children and a third on the way. The day the researcher traveled to the family center where credentialed worker Mercedes worked, it turned out that Lynn’s baby was coming a bit sooner than expected—she was in labor! The researcher suggested postponing the interview, but Lynn wanted to talk:

I'm in labor now. I am already two centimeters dilated. I starting working with Mercedes when I found out I was pregnant again, and I wasn't with the father. I didn't have health insurance and I needed help because I don't have transportation getting to everything. So I was referred to Mercedes.

My other two labors were pretty easy. When I had my son I went to school all day and went to my doctor's at a quarter to 5:00 to ask for a note not to carry my backpack. When I went to get up on the table my water broke. I had been in labor all day and didn't even know it! I was 15. He was nine pounds three ounces. I had gestational diabetes with both of those pregnancies. I don't have it this time though.

The first time we met, Mercedes brought information for the program and we did my Medicaid paperwork so I could get medical coverage for having this baby. I had just gotten Medicaid in a different county but I needed to switch it over. I had been staying with my aunt, but she lost her house so I had to move back here where I'm from. [Once she took care of the paperwork], I felt a lot relieved because I can call medical transport and Mercedes can help me get to the doctor. Because here there is no hospital anywhere around except for [city name], which is like 45 minutes from here. That is where I'm going to have the baby, and where my doctor is too. I started going to the doctor in my third month. This is my best pregnancy yet. My daughter is seven, and my son is eight.

Medical transport is really helpful. If you have Medicaid and you call them 48 hours ahead of time they'll have somebody with a county car take you to your doctor's appointment for free. There is a [public] transportation system but it doesn't always run the right hours to the right towns to get [to] the doctor's and sometimes you get up there and can't get back. That happened to my friend. She got stuck up in [city name] at Walmart. She had to call her mom and have her come get her after work. I was watching her kids.

No Place to Live—"Just Staying with Friends"

Lynn recognized that finding an affordable stable home was central to reaching her goals of uniting her children and going back to college herself. She reflected,

I am just staying with friends. Mercedes made it a lot easier, like she told me about housing services. We went to income based apartments I didn't know were there. That just makes it a lot less stressful for me because I am still staying with friends and my baby is coming anytime now, but Mercedes has been taking me to look for subsidized housing because I don't have enough income for a regular apartment right now.

I think I found a place. I am not quite sure. The lady is gone until next Friday so I mean I can stay with my friend for a couple of weeks after the baby is born but I would like to bring her home to my own place.

Lynn was resourceful in finding a temporary shared place with her friend, and they worked well together to get their children to bed on time. Yet, Lynn recognized that this situation exposed her children to detrimental influences that she was eager to avoid.

My friend, where I'm staying, she has three kids too. We work together for bedtime because it is mostly boys so they can all sleep in the same bedroom. 8:00 o'clock it is starting to get ready for bedtime. We get everybody down early. We have to be organized with all our kids up there. She has a five-month-old and she babysits her year-old nephew. But she kind of gets mad. She doesn't know why my children stay at their grandparents; she says, "My house is fine." I don't like to explain it to her it's because her boyfriend drinks. I just tell her, "Oh, it just gets too hectic here." I don't want to hurt her feelings but that's really why they don't stay there all the time.

Sharing Custody with Grandpa—Kids' Dad Started Using Heroin

I'm sharing custody of my kids. Mercedes helped me explain to my kids why they're only with me part time. And about the new baby. So that they are not jealous about me having the baby when they don't live with me full time. They understand, and they are well taken care of when they're not with me, at their grandpa's house. They stay at their dad's father's house half time. Their dad started using heroin so his family helped me leave him. I get a lot of help from them.

I don't have much help from my family. I get along with his Dad. We went to a parade together this morning because my son was in it. They're just helping me out until I can get an apartment big enough. Like I have the children Wednesday, Thursday, Friday night but all the time is too much with all the kids [where I'm staying]. My son gets cranky. They're in soccer and swimming, dance and boy scouts so he [Grandpa] helps run them back and forth. I haven't been with my children's father since my son was four.

Baby's Father Stole the Girl Scout Cookie Money

Lynn began to recognize that her current pregnancy was a continuation of her pattern of getting pregnant with drug-addicted men. With Mercedes' help she reflected

critically on the similarities between her parents' drug addiction and her attraction to drug-addicted men:

I was going through a time in my life when I was not worrying about the things that I should be. The baby's father was somebody that was not good. He was shooting heroin. Lying. Gone all the time. Mood swings. His eyes, his pupils would be like pinpoints. He would nod out.

I grew up with a family that my father and my mother both used drugs and were alcoholics, so when I first noticed the signs [with my baby's father], I just stopped seeing him. I noticed when he was coming home acting funny and he took my daughter's Girl Scout cookie money. Things like that. And he wasn't working. I was working so I told him to leave. I told him not to call me anymore, not to contact me. I thought I was pregnant, but we hadn't been together very long so I told him my due date is three weeks earlier. He thinks it's not his kid. I will never get any child support from the man. His wife doesn't get anything. And he just had a baby with another girl in February.

Goals: Now That I Am Away From Him I Can Focus

Despite her temporary housing and the impending birth of her third child, Lynn had a clear vision of where she wants to go. With Mercedes' guidance, Lynn has been using the Family Development process to move toward her goals.

Now that I am away from him I can focus. I just needed a little bit of help to get going. With Mercedes I write my goals down. I make lists to make sure that I do everything I have to get done. In the future I hope I will have a good job. I don't care if it pays a lot but something that I enjoy like home visiting or working with kids again, and I hope I will be settled into a place to live that my kids will be back with me full time. Maybe go back to college and finish a degree because I started college but I had to drop out because I riding with a girlfriend and then she dropped out so I was scrambling around with other students to get a ride. I had to withdraw—it just got too much. I hope to start back this fall when the baby will be old enough for daycare [at the college]. My brother's girlfriend starts [community] college this fall too. I am going to try to go with her, and work nights. I will get grants because I am a single mom.

I am glad that I got hooked up with Mercedes. We wrote my goals on a Family Development Plan. She doesn't really have to spell out the steps for me that much because I am the type of person where if you tell me one thing I can go and do it myself. She doesn't have to follow-up so much as she does with her other families. Mostly I just need help getting places.

Lynn Earned Her GED While Her Two Older Children Were Babies

When Lynn was pregnant with her first child at age 15, she was able to finish high school, learn how to parent, and develop vocational skills, thanks to a public school program with child care. Now, due to funding cuts, that program is gone. Lynn reflected,

I have my GED and I took early childhood education courses at vocational school. I got an early childhood education certificate. I had two babies at the time, I finished school with two kids. I was only 15 when I had my son, and 17 when I had my daughter. And I finished my GED! It wasn't easy. I don't really know how I managed to do it. It is like a blur. The school at [city name] worked with me. I put my kids on the bus in the morning where we lived and rode up with them to the school. Took them into the daycare there then I rode the bus to school and then rode back home at night. It was like a 55-minute drive.

They used to have this program for people in school who had kids. But they don't have it anymore. The daycare is gone and everything. They didn't have funding for it anymore.

Growing Up with Parents “In and Out of Rehab”

Lynn recalled growing up with alcoholic, drug-addicted parents and has vowed not to expose her own children to such abuse:

My parents were in and out of rehab and they would always say that they were just going to drink a little bit but there was no such thing. I don't see anybody being able to be a social drinker. My grandma used to take me to see them in different rehab places. They'd take turns going but it never worked. I talk to my grandma once in awhile but she thinks my dad can do no wrong so we don't really talk that much. She's always trying to blame everything on my mother. It was both of them. My mom is not bad now that she is not with him anymore. She doesn't do drugs now, but she has worked in a bar over ten years and she does drink.

My mom and stepdad are around, but don't help much. They don't see the children. My father was in and out of rehab. When my son was about ten months old, I tried like making a relationship with my Dad. We went to a concert with him. We rented a hotel room and shared it with him and we took

our son. My aunt was watching him during the concert. Well my son picked up these little things like candies. My ex-boyfriend thought it was a Smartie so he ate it and like two minutes later he was having seizures and passing out. It was a pill of my father's. We had to rush him to the hospital. That was the last time I talked to my father.

“I Knew What Drugs Were From the Time I Was ... Seven”

I knew what drugs are from the time I was like seven. When I got older I would wake up, there would be needles out and stuff. I would clean it all up before my younger brothers got out of bed. Then I would get everybody off to school. When my parents' friends came over they would bring their kids with them, so I would have babies to take care of at night, they would be crying.

I have two younger brothers. One is 20 and one is 12. My older brother got himself cleaned up. He was into drugs and partying but he moved away with my other aunt, my dad's sister. Now he's a supervisor at his job and he has a car. My younger brother's life is different because he is my stepdad's kid so he never really went through the stuff that we did. He was only three when I left home to have my son. He has a good life actually.

I have made sure so far that my kids have never been around anybody that drinks or does any drugs or even smokes cigarettes because I am like a spazz about it, that's why. On the weekends they don't stay at my friend's house because her boyfriend does drink. Not that they get out of control but I just don't think kids should be where people are drinking. Although some people may not think there is something wrong with it, it really like messed me up so I don't like my kids to see it.

Transportation Problems Limit Work Possibilities

In terms of work, I've worked in two factories. Other than that it was always with children. I worked in the apple factory and I have worked at [place of business] in town, all last year. It was hard—12-hour shifts. And I worked for a temp agency. They call you in all the time. When I lived in town I could walk there. If I had a car right now I would have a job working with children again.

I used to work in a child care program but I broke up with my boyfriend and it was his vehicle. I made good pay, too, and benefits. They told me once I get everything straightened out that I could come back.

“None of the Workers from Other Agencies Ever Got Back to Me”

Mercedes is helping me out so much; there is so much less stress now. None of the workers from other agencies ever got back to me. I don't need a lot of

attention but I do need some help because of so many factors like transportation and stuff. It just keeps leaving me in the same spot. I think if they had gotten back to me I would have a house by now.

“I Hope My Life Gets Better”

I hope my life gets better. I’m sure that I will get to finish school and have a car. I’ll make enough. They just started taking child support out of their fathers check [so that will help].

Family Worker Mercedes Benz Describes Her Work with Lynn

Credentialed coach Mercedes Benz met with Lynn Kennedy because Lynn was pregnant, was not with the baby’s father, and had an urgent need for help with medical care, transportation, housing, and other issues. Mercedes described her work with Lynn:

[Lynn] is a very pleasant girl. She is having a rough time right now. She has two other children—9 and 7 years old. Now she is pregnant for her third child, due in the next three weeks. She is 24 years old. She’s having trouble with housing. She’s living with a friend at this point.

I started working with her a month and a half ago. She needed medical coverage to get her prenatal care. So I was able to get her to do that. Our very next step is she needs emergency housing and emergency DSS. So we have an appointment next week and I will again sit with her through the whole process at DSS. It will be a nine-to-five, all day job to sit with her to do that.

She is eight-and-a-half months pregnant. I was able to help her get her a prenatal care appointment because she was having trouble with that. She’s a very intelligent girl she just is having a rough time right now and needs some support and some advocacy.

Lynn’s Goal: The Custody of Her Children

Her first goal is housing so she can get custody back of her first two children. They’re with the biological father’s father. Grandfather of the children. But she sees them constantly. Three to four to five times a week sometimes. She’s very much in their life.

Sharing a Special Moment: Feeling the Baby Move for the First Time

Yesterday, I received a phone call from her. She hadn't felt the baby move and very nervous about that. And she was leaking some fluid so she really needed to get to the doctor's but had no way of getting there. I picked her up and transported her to the doctor. They sent her for a non-stress test of the baby and while we were sitting in the room the baby started to move you know a fluke just wanted to show off. You can sense the love and attachment that she had with the baby. That is something that I really look forward to with my girls because with a lot of them there is a lot of detachment. I really have to work on bonding because they are so young. But she is 24, a little bit more mature. To hear the baby's heart beat and to be in the room with her while all this was going on, she was able to share with me a lot of personal things that were going on in her life. It was a very special moment. You know, she didn't have anybody else there with her. She was very scared of what was going on with the baby. So it was a great bonding period for her and I and also with her and the baby because she was so nervous that the baby hadn't moved and the baby moved. So it was very pleasant day.

If she had not connected with me she would not have gotten her presumptive Medicaid. That's for sure. She definitely would not have been able to go to her prenatal care appointments because she had absolutely no transportation. This was an emergency situation. She is very smart. She would have called the ambulance, and then she would gotten up to the hospital and had no transportation back home so she could have been stuck there. I had another girl that I had to take up there for a prenatal appointment around the same time so it worked out very well.

Analysis

What is going on in this Profile Pair? What can be learned? This profile pair illuminates barriers encountered by many mothers living on low incomes, such as multigenerational drug abuse and housing problems. Lynn's rural location magnified her limitations. Without a car, her job possibilities were limited. Lynn had worked for a temp agency that "call[s] you all the time. When I lived in town I could walk there." Her career goal was to work with children professionally again. She thought that if she had a car, she would be more likely to have a job like her former job "with good pay and benefits." Incongruently, when Lynn told the researcher this, she was nine months pregnant, in labor, a small step away from homeless. Lynn was clearly motivated and

had a track record of setting and reaching goals. As a teenage mother, she finished high school and started college. She had a positive work history. Yet, her pattern of getting pregnant with problem men had undermined her goals.

Lynn did not have the supportive family relationships many women turn to during pregnancy, and therefore especially appreciated sharing with Mercedes the “special moment” when her baby moved in utero for the first time. To Lynn, Mercedes represented a supportive, nonjudgmental, and knowledgeable person who could help her move toward her goals during this challenging time. In a respectful way, Mercedes offered the emotionally healthy example Lynn never experienced as a child. She appreciated that Lynn was “a very pleasant girl” who, although “having a rough time right now,” had used the Family Development process constructively to set and pursue goals. Their relationship has been mutually rewarding, as each has continued to fulfill her appropriate part in this dynamic.

Mercedes used the Family Development process (Forest, 2003) to build a mutually respectful relationship with Lynn, and to help her articulate and pursue her own short- and long-term goals. In keeping with the procedures outlined by Forest (2003), Mercedes helped Lynn use services as stepping stones to reach her goals, not as ends in themselves. The researcher hopes that once Lynn’s urgent medical and housing needs are met, Mercedes will help Lynn remember her insights into how her pattern of getting involved with drug-addicted men has shortchanged her and her children’s lives.

Like Jessica, Lynn is also constrained by Federal policies that emphasize short-term jobs instead of supporting a college education for mothers like Lynn who had

succeeded in college classes and wanted to complete a degree that could be a ticket out of poverty.

Although Lynn's life—and by association, her children's, was fraught with the chaos of unstable living conditions, Lynn's relationship with Mercedes strengthened her resolve to mitigate this chaos by bring order into whatever areas of life she could. An example is Lynn's working together with the friend with whom she is staying, to get their children to back at a reasonable time each night.

Note that this profile pair is shorter than most others, which reflects both the short duration of Lynn and Mercedes' relationship—only one and a half months, and also the brevity of the researcher's separate interviews with Lynn and Mercedes. Lynn was in labor during her interview, while Mercedes hustled to arrange housing and medical transport, so a sense of urgency overshadowed the relative spaciousness surrounding many of the other interviews. Despite this brevity, the researcher deemed this profile pair well worth including in this compendium because it showed not only the common human failing of a disconnect between plans, understanding the best approach, and action, but also how a relationship with a credentialed coach can help a mother gain insight and remain focused.

Urban Profile Pairs

Godfrey (Uncle) and Ekemini (Coach): “Not Coming In to Fix Him, But to Assist Us in What We Need to Do”

Credentialed family worker Ekemini Eno works for the New York City agency responsible for runaway teenagers. When the researcher arrived to conduct separate interviews with Ekemini Eno and the mother of Peter, a runaway teenager Ekemini

helped bring back from the streets, Peter's mother sent a message through Ekemini saying that although she was able to come for the interview, she arranged for Peter's uncle, Godfrey King, to speak with the researcher. Ekemini said, "She was supposed to be here to talk with you today, but when she couldn't make it, she suggested a family member who has been involved with the family, the male figure that backs Peter up. When it's not working with mom, Mr. King steps in. He has been very involved with the family." Mr. King told the researcher,

Peter is my nephew, so to speak. He was running from group home to group home and doing all the things he not supposed to do. He was 17 when Ekemini came into the picture, oh, about a year ago. She came because he had other workers from different group homes he was raised in and he was using drugs every single day. And he needed medical attention. His grandmother was having a rough time and the family just come together looking to see what was going on because so many people were coming and going. [Each time a new worker was assigned], I would tell myself, "You know, just another one." We felt like he was stepping backwards but we're still trying to, you know, maintain that support.

(Note: An inclusive interpretation of familial bonds is widely practiced among people with African roots. Mr. King simply referred to Peter as "my nephew, so to speak." Ekemini explained to the researcher that Mr. King was from the same Caribbean town as Peter's mother's family, hence the term "nephew" and Mr. King's willingness to assume a positive familial role in Peter's life, even to the point of his mother sending him in her stead to be interviewed.)

Ekemini Wasn't Coming to "Fix" Him

Mr. King explained,

Then Ekemini came and she starts implementing different stuff, different sources we tried to put into place. And it seemed as though she was going to do something, so we just give her a chance, you know. And she worked out pretty okay because we was listening to her, and with the help of the family, hopeful

to what she [was suggesting]. One of the first things as I was listening to her, I relate that she wasn't really coming in to [fix] him, but she was coming to assist us in what we had to do. When she [first] came to visit him, she said she can't save the boy, don't expect her to, the only thing that she can do is to get him streamlined. And with that little speech, from her demeanor, I looked around and I say [to the rest of the family], "You know, I think we can work with her." Because in the past there were others who came out and were going to do this or do that and all of a sudden they disappeared. When Ekimini started everything was at a standstill.

From Running the Street to Back in School

It was a delicate and desperate time for the family. Peter was missing, reportedly on the streets in a gang, dealing drugs. Mr. King described how Ekimini found Peter and won his confidence:

Peter was running, he was on the streets selling drugs, he was in drugs, gang activities and stuff like that. He went AWOL from the last home that he was in. He was around the area and doing whatever, whenever. So when Ekimini made contact and we got him to sit down and speak to her, there was a change!

Once Ekimini came into the picture, Peter begin to change. He was doing things that he's supposed to do with the services she was trying to get him in. [Since] she came into the picture it's a lot different. Because from the time she came, she put him back in his school. That was a first! She helps with little things, simple things you know, like medical attention. Peter was reluctant at a point, but now it's been addressed. That's major.

He was out on the streets, he came back home with his mom and another uncle who tried to help him, buy clothes for him now and again and try to see him go the right path. But there's just so much we can do.

Peter Looks Forward to Seeing Ekimini

Mr. King insightfully described the challenges of his position between Peter and his mother, and how Ekimini helped:

But Ekimini's been doing something with him. I mean he looks forward in seeing her! When she came into the picture everything just went upwards. She even took him to attend his medical appointments and things like that. Setting up other resources with other agencies. [We] don't know how long she's going

to be around because they keep changing them. We just have to see how far we can get.

His mother you know, she likes to do things her way. She has seen things that we have not seen. She is on a different page. So from her perspective she might say that it's not working. She wants Ekemini looking out for the kid. She's feeling the needs of the kid. Well Ekimini, tell the truth, she did a lot of work to get Peter where he is right now. She went to the school because there's some [drug and gang] activity at the school that you know we really can't prevent, but Ekemini she went to the school and the school is involved now.

Teamwork: "Everybody Got to Be on the Same Page"

Mr. King clearly understood the value of the plan that Ekemini helped the family forge, as well as the necessity for all involved to share in the responsibility for its implementation:

One of the most important things that I observed when she came in with her plan, like we all in a group had to join together to make it work because he just can't come off of the street into the home and be A-Okay. So the teamwork. Just by trying to support what was being implemented. Because for it to work everybody got to be on the same page. Just speaking to him positively in a support system.

I helped him a lot. I bought a lot of stuff for him, he was over at my house spending weekends and just to show him a different way you know. [Other than me], only his mom is supporting him [a lot]. The others, they do a lot of talking but you know, not everybody [in the family] will be in a position to buy a pair of shorts for him or a pair of sneakers or something, or give him money to go to the movies. There are needs, and if he can't meet some of these needs, he's going to go out there with the gangs and so forth. So we all had to come together.

His mom, well she supported him 100 percent, but as far as I can see from outside of it, she's doing it for her own good because she thinks that once he's in the system she can draw back. She's looking towards that end [of raising him]. But we're looking towards the welfare of Peter. So that is where Ekemini came in. She can come and speak to Peter now, but when she leaves someone's got to be there, to keep filling in what she [started].

As a respected man within the family and community, Mr. King was able to not only guide Peter and offer practical help, but also to keep his future in mind.

Looking toward College

Mr. King was thinking about a positive future for Peter:

Peter's trying to get into college. Yeah. I'd love to see him in college. Once he puts his mind to whatever, you know he's a bright kid. So his goal right now is to get to college. But he's trying to get a part time job in the mean time, if they keep him in school ... [those are his goals]. Ekemini, yeah, well, she kept different papers and they're really still going to it, you know. I would see him fill out some papers because in order for her to do X, Y, Z, he got to agree. And some [agreements] he kept, some [he] didn't.

Hopefully he'll get really [focused on] finishing school. My job will be over then. Once he can get to that stage you know I think it will be less stress. Yeah, once he finishes school. His older sister didn't make it so far. She just left school. He would be the first to finish school]. You know, we're trying to see that. He has one more year. That's the plan, that he'll go [to his last year of high school] next year. Once I can finish with Peter, things will be much better. Once I can see him in school, in college, getting a job, you know that will be a better time.

Every so often, Peter, Ekemini and I meet together. We come to the office, or sometimes if I'm over there, or she might call and say she's going to visit on such and such a date so I check my schedule and see if I can make it. She looks into that. Sometimes two times a month, sometimes whenever she's around. When she's not that busy, sometime she call and say, "Just pop over."

Other Workers Came In with an Attitude

Mr. King considered Ekemini's arrival in the family as a special opportunity to work together to get Peter back home and on the right track, a chance to overcome confusion. Although he did not use the term "family development," he recognized a profound difference between Ekemini's respectful, effective methods, and the disrespectful "attitude" he had encountered in the past. Mr. King reflected,

If Ekemini had not come into our family's life, there would have been confusion doing what I have to do. There's an opportunity you don't get every

day. Seeing Ekimini come into the home and her functions, what she's doing, you know you can just help. See with Ekimini, I feel a bond. The other workers, they came in with this kind of attitude. There's a big difference there. A lot of people they come and they tell you do this or you have to do that. And if you don't do this, this is going to happen. With Ekimini, we're going to do this to benefit Peter. This is teamwork. We work as a team. And there's a big difference! Because if you come into somebody and you're telling them, "Oh you have to do this," nobody wants to listen to you. But if you're coming to help us, it's help we need! There's a kid in need here.

I was involved [with Peter before we met Ekimini] because there are times when his mother called because the two of them fight and I'm the third party, to lend some help. I'm glad because now, instead of the third party, there are four. So, if you've come to help us, whatever services you can implement and once you implement them, they're here for you. Because after committing myself, now I have to do certain things myself. So it's a learning experience. Something I've never really done before but because of the kid, because of Peter, and because we now get him some kind of assistance, I accept it. So, this is how I find myself connected with Ekimini. So far no regrets!

Family Worker Ekimini Eno Describes Her Work with the Family:

AWOL from the Group Home

Credentialed worker Ekimini Eno described Peter's situation as she first encountered it and her subsequent work with Peter's family:

Mr. Godfrey King is a family member of a teenage boy who went AWOL. This young boy, Peter, is 17. He was in a group home for two years. The plan at the group home was to discharge him back to mom. He was in the group home because he had a behavioral problem. He doesn't try to keep to curfew. He wasn't going to school, he was involved with gangs. Drugs. Stealing. Just don't care about authority figure. If we tell him, "Don't do this," then that's what he's going to do.

Mom ... Couldn't Take It Anymore

So, Mom, his adoptive mom, she said she couldn't take it anymore. So, she took him to the hospital and voluntarily placed him in care. She wanted them to evaluate him and find out what was wrong—if it was mental or emotional or otherwise. She said he was diagnosed that ADHD when he was younger, and she still felt he had mental emotional problems, a chemical imbalance or something.

She adopted him when he was very little, 8 days old, from the hospital. The birth mother was into drugs. Went into the hospital, gave birth to him, left him there. An agency gave these children, Peter and his sister, to the adoptive mom to care for. She had them since they were babies. When he was 3 she adopted him, because his birth mother wasn't stepping up to the plate so the agency terminated her rights and asked Ms. Jones to gain legal rights. She adopted him at age 3. Now that he is a teenager, he's acting out.

When Ekimini was assigned Peter's case, she gathered together his extended family to help her locate him and work out a plan. Mr. King was understandably cautious. Ekimini said about Mr. King,

The first time I met him he was like quiet. He just sat there. Watched and listened but I tried to get him to talk, you know, contribute to ideas on how to handle the situation. It was hard initially because he wasn't that expressive. He was quiet. He just sat there and watched and observed. But I called him quite often. Each time we made a decision, each time we had a family meeting, if he was absent I would call him, let him know. Now he's very cooperative with me.

Ekimini Asks Mr. King, "What Do You Think? Can I Have Your Input?"

We had a meeting today. Mom and Peter, we discussed this is the decision that we came up to. If I needed Mr. King's input I would ask him, "What do you think? Do you think we made a good decision or do you think you can add to that?"

Man Stuff: Peter's Uncle Takes Him to the Barbershop

And gradually, with time he got to a point where he would call me back and make suggestions or he would call me and tell me, "Okay, I'm going over this weekend. I need to take Peter out, there is too much going on in the home. He needs time away from mom. I will take him to a movie or to the barbershop to have his hair cut." I'm still working with this family.

Ekimini Takes to the Streets to Find Peter: "Tell Him I'm Not Going to Get Him in Trouble"

I got the case in February of this year. At the time Peter had run away from the group home. He was upstate at [place name]. He ran away from the group home. The police called. The school went out and got a warrant for missing

person. They gave the adoptive mom a copy. I think they give the police station in the area and in [place name] copies so they could be on the lookout and if they find him they could pick him up. But the police have so much to do like that they [seldom] actually go out to find someone except maybe [if the person is] arrested and you fit a description; then they will be able to identify you.

When I got the case, I called the adoptive mom, to introduce myself and let her know that I'm going to assist with looking for Peter. If she knew where he could be. Family members. Friends. Anybody. Wherever, if she seen him on the street. She says while he was at the group home he had a girlfriend, her name was Jennifer, lives in the Bronx. [Peter's mom] was able to give me Jennifer's aunt's number and the addresses. I call them and they said, "No, Jennifer left." The other one said she let her go because of her behavior. I left my complimentary business cards with my phone number with mom and a couple [extra] cards so she could give them to anybody who might pass the number to Peter to call me personally. I asked everybody let him know I'm looking for him, I care about his welfare, I am just looking to help. I'm not going to get him in trouble. We're just trying to make sure he's healthy.

He didn't call me at that point. One day, Mom left me a message that she saw him on the streets. He was around the house. We rushed out to visit and she pointed to where he was supposed to be staying. It was like three, four doors away. Close by. And she showed me the address and she said he has a friend over there that he hangs out with. If he's not there he hangs out at Dunkin Donuts across the street, where young boys just hang around.

Ekimini: "Don't Scold Him. I Just Want to Get Him off the Streets"

Ekimini counseled Peter's mother not to reprimand him. Ekimini described the methods she used instead:

Well, I went to those places and I left my business card. Somehow someone must have gotten to Peter because Peter now came home knowing that someone was looking for him. We went out to visit again and his mom told me, "Oh he was here yesterday. You just missed him!" I had told her, "When he comes home, don't send him away. Don't scold him, just ask him questions and try to find out why he left, what's going on. Let him know even if he doesn't want to stay here we can find another place suitable for him. We just want him to get off the street, back in school. We want to make sure he's healthy, get updated medical care and things like that." So when he came home that morning she said, "He just left. He went to a friend's house to bring back his clothes."

Ekimini to Peter: “Oh, God, Our Prayers Have Been Answered!”

He came back while we were there. I was so excited! I’m like, “Boy, I’ve been looking for you!” He looked clean, not like someone that’s been running the street. He told me he was tired and he’d willingly come back home now. We said, “Oh God, our prayers have been answered!” His mom was also excited. At that point, she was willing to work. We sat down with Peter, talked to him. He said he was willing to work with the agency. He wants to come back and stay with [his] mom.

His reason for running was that he wasn’t sure his mom would take him back because, prior to him going AWOL the worker had come to have mom sign some papers for permission for Peter to visit mom over the weekend. Peter and his mom had a verbal altercation. Mom must have told him something that made him think, “Maybe she said, “If you don’t behave this way, don’t bother coming back,” or he went back [from his weekend at home] feeling, “Oh, she would never have me back.” He misunderstood. So he said, “Okay, I just go to my friends, they’ll accept me.”

Our goal with Mom was to get her training on how to deal with teenagers. Get to understand the new culture because it is so different. Mom is like 83, and Peter is 17 year old. That age gap. The way they dress. The way they talk. Everything is so different. ...

Our other goal was to get the family, both mom and Peter family counseling so they would get to understand each other more and get to work together much better. Peter actually expressed that he needed to understand Mom, and he wanted some ways of getting to understand what to do.

Peter and Mom: “Both Need to Compromise”

I suggested both of them could get counseling if that would be all right for them. And Mom said, “Yes,” she would love to. I asked Peter and he said, “Yes,” he would love to if it’s going to help the two of them get along better. Because they’re always arguing about something. It could be the way he dresses. His pants is hanging down. Mom is a little too rigid. So mom needs to let go of some of that stuff. You both need to compromise. So it was great that both of them were willing to work.

I didn’t get that much opposition from Peter when I met him initially. I was just excited that he showed up. That was one of my first cases when this AWOL unit opened up. When he showed up I was like, “This is wonderful!” I guess my excitement kind of drew him to me and I spent a lot of time with him until my director said, “You’re spending too much time. You need to work on other cases.” We talked about his health and then he wanted to go have

updated medical done. Mom actually wanted him to go back for a psychiatric evaluation and counseling but he was scared because the last experience he had in a hospital, he ended up in a group home. So I told his mom that we needed to take it slow. If he really needs to have the counseling and get back on his medication, let's wait for him to agree to do it.

She took him to the hospital for a medical update and then when they got to see the psychiatrist, he ran. So I decided at that point he's lost that trust with her. He didn't want to go back to the hospital with his mom.

You Could Go ... But I'm Going To Walk With You, If You Don't Mind

So I told him, "I will take you. You could go to the hospital on your own, but I'm going to walk with you, if you don't mind," and he said, fine, he would go with me anywhere. So we went and got his complete medical update. We got a dental check up. But he still resisted going for the psychiatric evaluation up to date. We're still talking to him, but he hasn't agreed. He feels that when he goes they might lock him up in the psych ward. That's what happened to him last time.

Ekimini and Peter's Mom "Trade Compliments"

Although Ekimini attributed her success with Peter to "luck," her methods reflected the steps and principles of family development (Forest, 2003) beginning with forming a "mutually respectful relationship." In Ekimini's words,

Whenever I give someone my word, I keep my promise. I guess I'm just lucky I meet people that are not too scared to work with me or the agency. With Peter's mom, when I went to the home, we, um, traded compliments. If I'm going into a situation, before going in, I try to put myself in their position. Sometimes it works, sometimes it doesn't. If it doesn't, I will just express, "Okay, I'm new at this. I'm not an expert. I am just trying to get work done. If you work with me, we will get something accomplished. If you really want it to work, we need to work together."

Mr. King: "Part of the Family"

And if I meet someone that's not willing to work like in the case of Mr. King who was just too quiet, I expressed to him that I needed him to communicate with me so that I needed his input. That he was a very strong part of the family. "This child relates to you as a male figure and we want you to please step in and help. You're already in, so there's no way you can run out!" (laughing). "But we need you to be a little more vocal. Let the child know that you're there.

You're supporting him and, uh, if you're not at least just let me know, so we would know what we have. But you just sitting there quiet and just watching, I don't know what you're thinking." He said he was just trying to get an understanding of what we were doing. That he didn't do it purposefully, he said that was his way of learning. Yeah. You're going to meet him. He's friendly, when you get to know him.

The Family Development Plan

The family development plan helps a whole lot because in the process of making the goals, accomplishing the goals, they're building self confidence, they're learning on how to actually walk the walk on their own and by the time the goal is accomplished they've accomplished something and they feel good about it. They feel like "Okay I had an input in it. I started it and I finished it." I think it really helps a whole lot.

Analysis

What is going on in this Profile Pair? What can be learned here? The family in this profile pair encountered many barriers and challenges. Peter was AWOL from the group home where he had been sent because of drug and gang activity. Prior to that, he had lived with his mother in an area where such gang activity was common. He and his mother were so deeply at odds that she voluntarily placed him in a psychiatric hospital for evaluation. Mr. King wanted to see Peter finish high school and go on to college, but Peter's sister had dropped out. Mr. King frequently responded to requests from Peter's mother to intervene when she and Peter were at odds.

Credentialed worker Ekemini Eno impressed the family as different from the revolving chain of workers they'd met before. She didn't promise to "fix" Peter, but to work with the family and try to find him, talk with him, get him medical care, get him off the streets and into a safe place. Mr. King thinks the significant age difference between Peter and his mother, and her set ways, contributed to the tensions between them.

Ekemini's graciousness and Family Development methods helped both Peter and his mother compromise. She called it "lucky" that people "were not too scared" to work with her, but her success seems to have more to do with professional training, empathy, and gracious cultural mores than luck. Ekemini formed a partnership with the family, asked them their goals, and considered the Family Development Plan key to articulating those goals and moving toward them.

Mr. King's ability to take Peter home for a few days when tensions escalated, take him to the barber shop, and show him a better way of life than his street friends offered, expanded Peter's family circle positively. With Ekemini's family development-based guidance, Peter moved from a dangerous street life to a stable home and college aspirations. Ekemini reflected that FDC differs from conventional agency work because FDC teaches workers to "go look out for strength" and "have them make their own goals."

Although Ekemini modestly attributed her success with Peter to her being "just lucky," she brought some important personal cultural attributes and professional training to the mix. She treated this relationship with the same level of care she experienced growing up in Nigeria—as a community interchange, with each person's opinions and contributions vital. This attitude led her to visit places where people might have seen Peter, graciously leaving her card in case he might show up. The humanity behind perceiving this work as a relationship, not just a duty, led to Peter's homecoming. When Peter showed up, Ekemini celebrated, "Oh God, our prayers have been answered!" instead of merely "closing the case," as a more conventional worker might. Inspired by her dedication, Mr. King "felt a bond" with Ekemini. The mutual

respect and trust that developed between Ekemini and this family set the stage for them to get Peter off the streets and move forward with their goals of getting him medical care, returning him to school, and encouraging him to pursue college.

Each person in this profile pair appears to have experienced transformative learning. Bolstered by Family Development training, Ekemini critically reexamined the conventional agency training focused on forms and protocols, then decided she could best help this family by using a blend of family development methods and her natural cultural mores (“trade compliments,” offer choices) into her work. Ekemini carried this beyond her personal learning; she brought her way of being into the various environments she visited in searching for Peter, as well as the ones she introduced him to once he came home: neighborhoods, police stations, schools, and the hospital. Likewise, although Mr. King had at first been apprehensive, his positive experience with her led him to critically reexamine his assumptions about the kind of relationship his family could have with a family worker and the individual, familial, community, economic environments in which they lived.

Although Ekemini came into Peter’s family’s life through an agency referral, Mr. King and the others in Peter’s family joined together with her to create a support system reminiscent of a village, surrounding Peter with a flexible, yet strong, multigenerational circle. It is possible that the cultural mores Ekemini brought from her native Nigeria, and those that Mr. King carried from his Caribbean island town, inclined them each to recreate a “village” around Peter here in the New York city streets.

Mary (Grandmother) and Tracey (Coach): “Before I Met Ms. Thomas, I Was Ready to Give Up”

(Note: Because this interviewee did not offer a pseudonym when interviewed, the researcher chose “Mary Seacole,” the name of a revered nineteenth-century community nurse in Jamaica, the interviewee’s native home.)

Mary, the grandmother of Mark, an “active” young boy, described the conditions that brought her into contact with credentialed worker Tracey Thomas:

This agency lady brought me over to Home Place, and being there I was introduced to Ms. Tracey Thomas. She have more patience than any human being could ever have. I reached to a point with my grandson’s behavior problems, that I meant to give up.

Mark is 7. He’s active. He just want to play. At home he’s the only child so when he gets with another kid he gets so excited. He’s loving, he want to be with you, he want to give you all he has to play with. But there are times when he’s playing with a kid and that kid doesn’t want to play. My grandson doesn’t give up easily. When they say, “Stop,” he still want to play. And that’s caused him a problem, like they’re blaming it on him, but not Ms. Thomas. When he started to come here he never really want to listen. They have a hard time with him in the after-school program because he thought that being here after school it’s time to play with the rest of the kids, but here he need to do homework.

Ms. Tracey Thomas help him with his homework , “Let’s read books” and stuff like that. Now that he get used to it, he started to get calmly. Ms. Tracey Thomas told me when he wasn’t ready to do his homework, she give him a break and said, “Okay, whatever time you’re ready you come and get your homework done, but you have to get it done before you leave here.” She said he just come when he ready and said, “I’m ready to do my homework.” She gave him some choices. Gradually, that worked. He’s been improving.

Before I met Ms. Tracey Thomas, I was ready to give up. At school there was a lot of pressure on me for this child. They want me to take him to get medicine to keep him still in school, so he wouldn’t disturb the class. I feel really upset about it because I know this child can learn, he can do better step by step, he will change. I said, “I’m not going to put him on medicine to please you all.” And they said, “It’s not our place to say, ‘Take him in to see a psychiatrist and let them tell you if he has to go on medicine or not.’ But we

feel that he has to go on medicine because he is so hyperactive, he's not keeping still." It was getting to me!

So I asked them "Who should I go to? They gave me a paper, sent me to the T building over Queens, they suggest that I go there. They were working with me, giving me and Mark a little counseling, one on one, you know just to tell me how to deal with this situation to encourage me. When the evaluation was finished, Mark started to go to school. They closed the case, because Mark is getting counseling in school. He's doing fine now. He's going into first grade in September. He's reading for me now. I'll say, "Come Mark, I need you to read for me." Or if I'm reading a book he says, "Mommy, if you need help just call me." I said, "For what?" [He replied], "To tell you how to read it." My husband laughed.

Eight Years Working a Live-In Job, but No Help to Go to School

This is daughter's child. He lives with me. When he was just born I used to have him every weekend because I used to do live-in babysitting with a nice couple, both of them lawyers. I lived in their home from Sunday until Friday. I would clean up, wash clothes, iron, cook, look after the kids. I would come home on Friday night at 11:00 and I go back Sunday evening. I be working hard all week, then when I come home on a Friday night I go and pick up my grandson from his mother, because she's wanted to have a free life. She didn't really want to spend the time with him. He was at her house but she would leave him with whoever's around. He's my first grandchild, so I used to take him every Friday night and keep him through Sunday night.

I worked for these people when they had one kid, until they had three kids. I told them I needed to find an evening class to finish my education. They came home at 7:00 in the evening, so I said, "If they could get me into a class from 7:30 until 9:00 or so, I would be grateful." But they never interested to do that for me. It was a very tough time for me to leave. They didn't want me to leave. I said to them, "Okay, I need to get some education because I didn't get that when I was younger. My mother died when I was eight years old." But they didn't really want me to finish my education, they didn't have the time to do that for me. I said to them, "I'm going to give you another year of my life here and after that I have to quit because I have to go to some school." And even when I give them one whole year notice, they tell they didn't get any warning. I give them another two weeks notice, and I tell them I really have to go because "Your children are getting big, they're coming home with homework, I can't help them with." That's when I really decide to leave. I lived with them for eight long years.

Afterwards, everything just changed. I get really tied up with my grandson. He was six months old.. I just take him to live with me. His mother

was around so I didn't want to get custody at that time because I said that's her responsibility. But the situation wasn't nice. There's a lot of crowded people. She was living with a friend, but it wasn't appropriate for having a baby around certain type of people. He was just a little baby you know and I said, "Okay, he's my grandson; I'm going to take him." So, I took the child because I wasn't working. I couldn't work because I had my grandson all day. My husband would keep the child for me in the evening while I go to evening class. So that's how we do it.

To Daughter: "You Need To Live With Your Kids, Grow Them Up"

When my grandson was two years old, I have his birthday party. I spoke to his mother. I said "Listen, you have to take more responsibility for your child. This is the only child you have and you're a young person, you need to take care of your child." She got pregnant again, she had a baby girl. I said, "You need to live with your kids, grow them up. I grow you up and I love you." She said she's leaving New York and she's going to go to Florida to live with her father. I said, "Okay fine, as long as you're going to take your child with you." She take both kids.

It tore me up but I want her to be a mother for this boy. I thought about those things. She went away and I didn't hear from her for a year. Then she called me up when Mark was three years old. She told me that she's coming to New York. She asked if she can come down here and I said, "Sure." She comes by me for a visit. So when she come I said I talk to her, "You know, the kids are learning, playing, nice together, they're sister and brother, why don't you just get an apartment here in New York and I'm very close, you can bring them and drop them off sometimes or you know if you have to work and stuff, why do you have to go all the way to Florida?" Then she get a job in New York. I have the two kids now and she stopped working, she was in the house. I said, "No, you can't do this. You get a job, get a place for your kids and yourself. Do something with your life." She said she was going to go back to Florida.

I thought she had both children there, but when she go to Florida she [only] take the little girl. She took her son [from my house], but left him on the same place where he was when he was a baby. After a year someone from the house called me to ask me about something. They said to me, "When last time you speak to Miki-Biki?" (They called my grandson "Miki-Biki.") I said, "I haven't spoken to him in a long time; his mother took him to Florida. I haven't seen him, not speak to his mother." And this person, he say, "He's not in Florida, he's right there. She didn't take him with her, she left him here that same day she catch the plane."

Mary Rescues Grandson from Risky Setting

In this profile, one sees the strength of a devoted grandmother who stepped in when her daughter left the four-year-old grandson in a living situation that turned out to be heinously abusive. Mary continued,

So I said, “What?” He said, “Yeah,” I said, “Put him on the phone.” I spoke to my grandson! That was a Sunday evening. I was off [from work] Monday. I asked my husband to drove me there. I bring home that little boy that night. And I keep him Monday, Tuesday night, Wednesday night. I [took him back] because I had to go to work Thursday, Friday, and Saturday. And I keep on going. When I dropped him off I always buy grocery food to take to that house. And then after I do that three weeks, I said to my husband, “You know what, I’m going to take this little boy. He needs care. He is so skinny. He come down like a little piece of stick, he’s not getting good care.

When I go there he does not wear clothes, he has on a little t-shirt, no pants and he’s all dirty looking. When he comes to my house he said he doesn’t want to go back there.” Well, my husband was like, “You have to think twice because how are you going to go to work?” I said, “He’s my grandson and he’s suffering and I’m not going to leave him for no one to abuse him, I’m going to take him.” He was five years old but he wasn’t going to school. Sometimes I go there and it’s only kids there, no adult. No one to pay attention. He just run up and down, he’s climbing the counters, just going in the fridge, just drink water, eat whatever he can find. So I decided to keep him.

Getting Custody

I get a hold of my daughter and I said, “Your son needs help. I took him to [enroll him] the school and they said I have to show paper that I’m charge, I have custody. The only way I can help him [is to get custody].” I go to the court, I get the paperwork, my daughter sign the paper and the court grant me custody for Mark. She was glad! She said, “You’re the only person who can take care of Mark.” And that was it. He need a home. He need a bed to sleep in alone. It’s not a mansion but my house is clean. He have a room for himself, he’s comfortable.

I didn’t know the court was going to send someone at my house. Someone just showed up and they said they had to talk to me and they had to talk to Mark. I said, “Sure.” They speak to me and then they asked me for Mark’s room. She went in, and she comes back out smiling. My husband was there. She said, “Your grandson is such a sweetheart. I asked him if he loved living with grandma and grandpa and he said, ‘Yes.’” The lady asked Mark,

“Who cooks dinner for you?” And he said, “Oh my grandpa. He cooks chicken and rice and peas and it nice!” The lady, she said, “That had me tearing up in there. I asked him a couple of questions and he said he want to stay with grandma and grandpa because he love them.” And when I had to write a paper for the judge, fill out a form to say why I want to care for him, I told them because I love him and that he need him to go to church, and school, to grow up the proper way. And the judge just look at my daughter and at me said, “I’m going to hand this child over to his grandparents. If you want to see him, you have to come to the court to get permission.” I said to the judge, “It’s not like that, she have all rights to come and see her child, Judge, it’s just that I want to be there for this child.”

“They Kick Him Out of School at Five Years Old!”

When I get him in school, he act out, they put him in a class with 25 kids, he never been to school. They call me to meet with the teacher, principal. When I get there, [the teacher] was pulling him up and he was kicking his feet. And his feet catch her but she didn’t say it like that. They say he pee on himself. He said, “Mommy, I told her I want to use the bathroom and she didn’t let me use the bathroom.” I said, “Did you let him use the bathroom?” The teacher said, “Oh, I bring him in, when he comes out, five minutes later he told me he wanted to use the bathroom [again] so I didn’t let him go. So he made on himself.” They said, “We have to kick him out.” They kick him out of school at five years old! They said, “You can’t bring him back here until you get him evaluated.” I have to go all over New York City to talk to this person, that person, for him to get evaluated for him to go to the school that he’s going now. I get him checked for brain damage, hearing, everything is good. I get him checked to see if he were molested. I get him checked entirely. Because of what was going on in his life. Everything was clean.

But then, one of the doctor they told me that maybe when he was with those other people, maybe they used to like hit him in the head or stuff like that. And my daughter told me at one point that he used to bang his head on the wall. Like when you speak to him if he wants something or he hungry and you don’t give him food that he would bang his head on the wall.

And I said, “I saw him do it here.” [When he was still staying with those people,] he used to like put his head in his shirt and cry and drip with water and I said, “What happened?” Mark said, “I’m hungry!” That is when I just took him home with me. When he come to my house he used to climb and tip things, go in the fridge and take the juice and I said, “No, that’s not the way to work. You have to ask permission to go in the fridge”. I trained him.

Teaching Herself to Drive: “You’re Not Going to Discourage Me”

I have to run here, there, for Mark. I didn’t have a car, I had to take the bus. I take my money, I bought a little car. I did not have driver’s license [yet, so] I used to take the car and go in the neighborhood like 11:00 or 12:00 at night and my husband stay with Mark and I used to learn to drive myself and then my husband taught me to read the book and that’s how I go and get my driver’s license.

When I get my car I could take [Mark] here, there and everywhere. I buy an automatic [car]. [When I was learning, my husband] used to say, “It’s dangerous. You can’t...” And I said, “You know what, I do it myself. You stay with [Mark].” So he would stay with him late at night and [I’d] be out learning to drive. My husband was very scared for me going, he said, “It’s not safe, you’re out in the street.” But I go in the back area. It’s me alone and I can’t drive but I just take my time because it was late at night there wasn’t anybody. He was afraid because I can’t drive and I may run into a car a parked car. He was also afraid somebody may harm me. He would say, “It’s late and you’re alone, you’re a woman, you’re driving around and someone may see you and drive you down.” But I say, “You’re not going to discourage me, I’m going. You are not here when I needed a ride.” Yeah. I can’t go [practice driving] in the day because Mark is there; I can’t take him in the car with me because I can’t drive. Mark isn’t at school because they kicked him out. So I had to learn to drive by myself. And that was it. I got my driver’s license.

Mary Tells Mark’s School: “You Guys Not Helping Me”

I have gone through a lot. I have chest pain. I’ve been in the hospital, in and out with pain, since I have that child. I was never sick before. Never take a day off.. But since I got Mark everything was on me. Every telephone call that comes in the house. “Is Ms. Seacole there? Mark this, Mark that.” I started to have chest pain. At one time I told her, “You’re making me sick now. I can’t answer my answering machine when I come home because every time I play it it’s you on the machine, about Mark. And I got sick.” I spent a whole week in the hospital. Stress. I went back again chest pain again, the heart is very slow, they can’t find no pulse, it’s very slow because I’m worried, I’m stressful.

So I told them at the school, “You guys not helping me. I need some help with Mark, give me some help else I’m not going to send him to school, I’m going to keep him home and let him drive me crazy. And that the time when the school get me the next agency the next agency took to me Home Place. That’s where I get to meet Ms. Thomas. If I hadn’t met Ms. Thomas, honestly, I was going to give up. I was going to go back to the court, have him turned over back to his mother. Like it’s up on her now, you know it’s up on her. If she wanted to take care of him, she’d take care of him. If she wanted to

bring him back to where she did left him, it's her child. It's my grandchild, I love him with all my heart, but it was going to get me crazy.

Mary Takes Her Grandson: "My Life Came Apart"

After I took him, my life came apart. Like I have no job, my money is gone from the bank. Thank God my husband get a little better job. It broke up my marriage for a while. It was too much of a strain on my husband. It was like we're on the verge of going to divorce. And then, we dropped everything, talked about everything and I said, "I'm not giving up because my grandson needs me."

When the judge give me custody she said to me I can go and get help for him because I'm his mother and his father now, she said, "You can go get Supplemental Social Security (SSI) for him." I went and I get SSI and that's the only thing I'm getting, to buy clothes for him, food, other things. All my bills, all my credit cards, everything flushed down because I have to use all that money before to take care of Mark.

Mark does not have insurance, I have to pay cash to take him to the doctor to get medical, to buy food and anything. He didn't have that. [Now] I get Medicaid for him and all of that. He just start getting that like last year. It's a little better now but I have to have food and lunch for him and all that. And I mean it's not like he has a dad bringing him something extra. I don't have a job, so whatever income I get for him from SSI is between taking some of it to put my rent with what my husband is paid, because he has his own bills too. You understand. And when I wasn't getting the SSI, my money finished.

It was bringing problem between me and my husband. All my money's finished. [When I was working for that family,] I pay the rent, lights, gas, food, and my husband didn't have a proper job. The job that he was doing it wasn't a good paying job. They were paying I guess at that time \$6 an hour. That's not very much, because our rent at the time was \$950. Now it's \$1100. I was the one who was making more money. When my husband come home he doesn't even have \$20 left. When I go to the supermarket I can't even ask him for \$10 because he don't have it. He don't have money to go to work, to put gas in his car and whatever. So I was the one that was really handling the money, taking care of this end. So when I decided to take Mark he know that things was going to go bad.

When I left the job with family, that put me to \$400 a week, right. My husband well he just have to give up because he saw that I wouldn't give up on Mark. What I do is I did take in like two other kids to baby-sit at my house to help me to get some money. But then I had to stop because I used to have to go here, there and everywhere with Mark and I had to tell those parents, "Oh I'm

not going to be home tomorrow,” and it wasn’t right because they had to go to work too. So I couldn’t do it anymore. I used to work in a beauty parlor, but I left there when I take Mark. So when I couldn’t do the babysitting because of Mark, my friends they would come over and let me do their hair just to give me the money. Because they know my situation.

If I hadn’t taken Mark in, things would be a lot easier. I would have had my house, and I would be in my job and going to school. Having Mark is really blocking me a lot because I can’t really get a job. Okay, sometimes I tell myself okay even if I get a job, like I get a job, 8:00 in the morning, because the bus come at 7:00. And they’re not going to give me a job from 8:00 until 3:00. Or even if I get a job, see he’s coming to that after school program and I pick up at like 4:00 to 4:30 and I work until 5:00, I still have problem to come to get him. And every minute they’d be calling me from school. Another minute I have an appointment for Mark. Right now, I have an appointment for him to go to his eye test. I have an appointment for 8:00 to go get his dental cleaning, and I’ve got an appointment to get his medical checkup. My whole life has just been around Mark. I glad I have Mark, and I glad I get to see Ms. Thomas. She’s a sweetheart.

Despite the court’s awarding Mary custody, devotion alone was not enough to raise this child. When Mary enrolled Mark in kindergarten, the school called frequently with complaints, ultimately requiring a psychiatric evaluation. Mary told the school, “You guys not helping me.”

Taking her grandson strained Mary’s marriage and finances nearly to the breaking point. Mary’s decision to raise Mark coincided with her quitting a live-in housekeeper job of seven year’s duration, which meant that she and her husband could no longer rely on Mary’s paycheck, which had sustained the family until that point. During the long years Mary worked as a live-in housekeeper, she asked the couple for whom she worked—both lawyers—to help her attend an evening class. She was determined to pick up the education she had to drop at age eight when her mother died. Since her employers got home each day at 7:00 p.m., Mary hoped to attend an evening class from 7:30–9:00 p.m. Her employers’ failure to help her continue her education

added fuel to her determination to quit her job, care for grandson, and pursue her own education. She enrolled in a pre-GED class, and decided to learn to drive. It was the difficulty of getting Mark to his many appointments that galvanized Mary's conviction to pursue her driving education.

Taking Mark Was Very, Very Hard on Mary's Marriage

[Taking Mark] was very, very hard [on my marriage]. It was tough. I felt very angry about my daughter. When I have her I was 17. She had this baby when she was 22. I had two kids on my own. She's going to be 29 in September. And my son, he's going to be 22. I had them five years apart, but she has her child two years apart. Nothing wrong with that, but take care of your child! She's a party girl, a dressy type. She didn't want to have kids to bother with. She just leave them. I'm so angry with her, even today. [Showing photos:] This is my granddaughter. She's a beautiful girl. That's her mommy right here, and my son [shows baby picture of her 22 year old son].

He doesn't have children. No, no, no. He's in college for engineering and working for an engineering firm. He's focused, and he's mad at my daughter and mad with me too. He saying I need to make his sister take care of her kid. He said, "I'm angry that you have to take on all this on yourself but Mark needs a home." He see that she just want to have the free life. I said, "Listen, Mark reads, he comes a very long way. And I've been there from the very tough, hard times when I just get him. And I suffer with him and I bring him this far." I see the changes in him.

He has a lot of problems [because] he loves to play. In my eyesight I know he can do better step by step, he just need some chance. And I tell them, "Please, let's give him some chance." His doctor said, "Ms. Seacole, send Mark to Jamaica. Do you have family back there? Let him go there and play. He's cooped up in the house. He's the only child here, you can't play with him all the time, he needs kids to play with. Those teachers have no patience."

Mary Sent Mark to her "Sister" in Jamaica

I sent him to Jamaica for three months. I promise him, "I'm going to let you come back for your birthday." I book him a ticket. He went to my best friend. They registered him in school, I send down his medical records. I get good [reports] from the school and my friend. He just wanted to have some free time, to play with the rest of the kids in Jamaica. He was good. I spoke to a teacher there and she was like, "What is they talking about? This child is playing with other kids; we don't see no [problems]." My friend and I used to

work together in the same factory. She married, she had kids, she's in a church. And when I went to Jamaica Mark call her Auntie Justine and her kids call me Auntie Mary. So I just took her for my sister and everybody there think we're sisters. But then I get to miss Mark so much, I sent for him before the three months was up.

Back Home, the School Called about Problems

When he started back to school here, they called me, "Mark was acting out today. Mark was picking up something off the floor." They call me on the phone one morning, "Ms. Seacole, is something wrong with Mark?" [I asked,] "Why?" "Because he's passing gas in the classroom." I said, "Nothing is wrong with him. He had a cup of chocolate Quik with milk, he had an egg," because I give him breakfast every morning before he left. So maybe that's why.

Then they call me and say, "There's something very disturbing. This child said Mark touched her." I ask the teacher, "Did you see when he did it?" [The teacher replied,] "No, but she's saying that he did it." I said, "Okay, I'll have a talk with him when he come home." When he comes home, I ask him about everything. I said, "Ms. [teacher's name] called me and she left a message on the machine, I said would you like to hear it?" He said, "Yes." And he was crying, "I didn't do that!" I didn't touch no kids on their butt..That's not true, I don't do that!" He put his head on the chair and he cried. He hold onto the door and I said, "Mark where are you going?" [He replied,] "I'm running out!" Because she left the message that Mark touched this child and the child make the complaint and the teacher could have wrote a letter for sexual harassment but she didn't because the police would have involved and all those things. So because Mark hear those things he was so upset. He didn't want to go back to school.

The next day he didn't want to go downstairs to get on the bus. He was scared that the police were going to get him. I said, "Ms. [teacher's name], you say the children they were in the line. You say the girl say Mark touch her on the butt. I spoke to Mark, he's really upset, he said, 'No, no, no, I didn't do that!' Mark said, 'Mommy, everyone was pulling out of the line and I pulled her back in the line, I didn't touch her on her butt.'" And then I said to her, Ms. [teacher's name,] "Many times you call me to tell me things. Did you see this when this happened? No. Did the other teacher see? No."

The next time the teacher called she said Mark said a little boy said Mark showed him his privates. I asked the teacher, "Where you there? Did you see it? Was anyone supervising the boys in the bathroom?" She said, "No." I asked Mark about it. He told me, "Johnny told me, Mark look! So I said to him, look at mine too." They were using the bathroom together. When I told the

teacher this she said, “Okay, hold the line Ms. Seacole.” She come back, she said, “You know what, let it go.” She told the little boy, “If you tell me the truth I’ll reward you”, and he said, “Yes, I’m the one that showed it to Mark first and then he show it back to me.” I said Ms. [teacher’s name,] you know what? They are six-years-old boys. They went in the bathroom at that same time. Okay? Don’t call me for things like that! You definitely need some medicine for your brain! You’re sending me to the hospital with chest pain when you keep on calling me and telling me all these things. What do you want me to do? You just keep on attacking him!

So when Mark came home with bumps on his forehead. I say, “Mark what happened to your head?” [He replied,] “Oh this kid hit me in the head.” The nurse called me, she left a message and she tell me what happened. She asked me if I want the number for the other child’s parents. I leave it alone. I don’t pressure them about anything. Mark comes home with his shirt buttons broken from his shirt. I say, “Mark, what happened to your buttons?” And he say, “Oh, Mommy, [teacher’s name] pull me like this and my buttons flied.” I don’t call the teacher. I don’t make their bother. I get the needle and the thread and I sew it back. But everything that that little boy does they complain.

I was about to give up. That is when they send me to Ms. Thomas. The first time when I met Ms. Thomas is that evening when I come to pick up Mark, because the bus dropped him here from school. When I get here she introduced herself to me. You know we talk and I was telling her about the problem then she said, “Don’t worry about it, we’ll work with the school. You know we just have some patience, we will see how far we can go. Don’t worry Ms. Seacole, it will be alright.”

Ms. Tracy Thomas: “Finally I Get Somebody to Tell Me It Will Be Alright”

Then it was like something was just moving out of me like, “Oh my God, finally I get somebody to tell me it will be alright. I said to myself, “It seems like she’s the type of person who [doesn’t think], ‘Oh he should be a perfect kid.’ [Later that night] I spoke to him, “Mark, this is after-school. Be nice now because Ms. Thomas speak good about you.” And then later during the week she didn’t complain to me right in here, for him to hear. She just come to me and she said, “Oh, Mark didn’t want to do his homework so I let him go and have some time to play and then he comes back and he does his work.” And then when I had trouble with school, she said Ms. Seacole, let’s focus on how you want to help Mark. We’re working with him, we are here, we’re advocates. We are trying to let him understand [that he needs to do his homework]. You are doing a good job! He could be on the streets, he could be suffering, he could be dead, [but you took him]. I commend you for everything you do for Mark!

Ms. Thomas is different from the school and the other agency people. Deep in my heart I know she will present herself [honestly] to me. The other day something happened wherein we were getting a lot of complaint about Mark. She said to me that she went to a meeting where she was getting some information about kids where the school sees a problem. She said, "Ms. Seacole, I don't want to seem that I'm coming on too hard." I said, "You know, I'm just tired of the complaining. I can't take it in my chest. I will have to just move somewhere else, start him over like in a different school." And she said, "But that's not going to help. Maybe you should take another look at [hyperactivity medicine]." ... Then I started to cry. I said, "Ms. Thomas, I'm getting sick now." The next day when I come back she said, "Ms. Seacole, I'm really sorry. I apologize. You know, I feel like I was coming down a little bit too hard by saying that to you."

"Never Has Any Other Worker Apologized to Me!"

Never has any other worker apologized to me! I said, "It's okay, Ms. Thomas, you just want to tell me the truth. I have a problem hearing about medicine [for my grandson]. I have no hard feelings against you., I still love you, Mark love you." And it was good. She's just a sweetheart. I mean she's going to tell you the truth.

She really looked out for me and Mark's situation. Anything she would say to me she like taking me for a friend. She say, "Well Mark wasn't being this good today," but she didn't take as a stick to beat me in my back you know. She just said, "Well, I spoke to him and I tell him that it's not nice for him to do it." Because no kid is perfect.

"Since We Started Working with Ms. Thomas, Things Are Better in My Marriage"

And since we started working with Ms. Thomas, and Mark's coming here, things are better in my marriage. It's good, good! We go on trips. They took us to the Poconos, me and my husband. Mark stayed with a friend of mine. She have a six-year-old child. So things is going good. Most of the time even though my husband was kind of itchy about the whole thing, he is the one that really work with Mark you know like he will check the homework. Sometimes on a Saturday he will take Mark with him if he have to go to a park or go anywhere. So we both work with him. Yeah, he's involved.

Finally, Mary Can Pursue Her Own Education

My goal when I started with Ms. Thomas was to get some help with Mark. And I'm still in school. I want to do my GED class but right now I'm still doing basic learning. Yes so you know that I can really get myself prepared to do the GED test.

When I was a child in Jamaica, I went to school while my mother was alive, but she died when I was eight and after that I grew up with up strangers, neighbors. They took me in. They give me clothing, they give me shelter and food. But they could only send me to school like one day a week or two day a week. They used to just keep me home to do housework and take care of their other kids. And basically as I told you I grew up on my own without a mother or a father. And living with the other set of family I was still on my own, taking care of myself, comb my hair myself, bathe myself. Go attend a Catholic church.

[The people I grew up with] didn't let me know who was my real family. They didn't introduce me to my aunts or my brothers and sisters. My mother had five kids. Three girl and two boys. The other two girls, I don't know them because they probably grew up just like me. They are somewhere where I don't even know. But I see them when I was young. And my two brothers, one died, accident. And I had one left, he's in Jamaica. My father was still alive but he used to drink a lot and smoke so I wasn't living with him. He used to come and bring money for them to feed me. But no school or anything.

Before my mother died, I loved going to school. That's the main reason really why I took Mark, because I know of his poor chance. When I look at that background of me and Mark growing up, I said, "I can't make him suffer like that, I need to help him." I didn't want him to be like that. [Even thought I didn't get to go to school myself,] I send my two kids to school. My daughter go to high school, she go to college. My son he go to high school, he's in college. So I said, "I don't want Mark to grow up and can't read or write. Because I know how it feels." So I decide to take him. It's really painful at times.

I just want the best for him. You know he's such a sweet, nice handsome boy. And I just want to be there for him and I'm praying every day to God that he could just talk to his brains and change him and let them see. Because the teacher already tell me that he's very smart, he's intelligent but they just don't have the patience to be with this situation. He's been bounced around all over.

Mark's still young. I would love to live to see him grown and responsible, 18 years old, knowing wrong from right. So that when mommy—he calls me mommy—when mommy's not here anymore and whoever he's with, whether it's still with my husband, if he's in school... I said, "God, if you have to take me now you can but please don't, for Mark's sake. I would love to live to see him get a little bit bigger so he can understand." Because if my eye close right now, that's it for him. I see it, I know.

I don't have no help with him [now when] I'm alive, nobody's [going to] look out for him [when I'm dead]. I'm 46 years old.

Family Worker Tracey Thomas

Tracey Thomas recounted the family events that led to her first meeting with Mary Seacole:

Ms. Seacole came to the agency because she had her grandson. Her daughter just dropped him off. Ms. Seacole had problems having to balance her work schedule with this new child who has special needs. And since she had already raised her children and now this is taking on the role of parenting her grandchild and especially because he has special needs. When she came into the office she was so overwhelmed. She just wanted services to help with all the challenges of getting the bills paid, getting him tested at school, getting him on the right medication. He was six years old.

Mark's Mom Left Him with "Bad Company"

His mom was involved in ... just to put it in a simpler form, bad company. She just left him, and left. Actually it was a history of leaving him off at different people. He was molested and just has this terrible, terrible history. This child had been locked in a room for days without food. When he came I think that was the first time he started to socialize with children his age. He never did go to school. So when Ms. Seacole finally got him into a regular school he had a lot of difficulty socializing. When she came in she was having a real hard time and to top it off she, she herself does not know how to read and write. The advocates here were able to sit with her and to figure out what, how we can really help her to reach her goals.

Her language is English, but she never had the opportunity to learn to read and write. She attended school some, but I don't think she had gone to the stage of completing high school. She had a job. She is a hairdresser. She's able to function in the sense of answering the phone or going about her business. But having to fill out a form, she has difficulties.

Mary Came "in a Fog of Tears ... Down to Her Last Meal"

Since we work closely with our community and all the agencies around know each other, she was referred to us by someone from her church. The day she came in she was in a fog of tears. I was in, not knowing. She was down to her last meal, she had to leave her job to take Mark back and forth and so on so. She was ready to give him up. She said that she is going to just find where

the mother is or just give him away regardless if it's foster care or whatever it is. The mom isn't in the picture. The grandmother has legal custody now.

She's married, and she had told us just having this child now has taken a lot on her marriage. She had to quit her job and working with just one salary coming in it was really, really hard for her. When she came in I think her goal was to find some financial assistance. That was her top priority. We were able to get her some, and help with food stamps, and the food pantry.

That was some of the immediate goals. Then the other one was getting someone to evaluate her grandson to really know what step to go. You know, if he needed to have medication or getting into specialized school or whatever the case was.

Mary "Has Made Progress toward Those Goals!"

She has made progress toward those goals! Oh my gosh. Absolutely. It's great. I think when we started just the idea of her being part of our program, we were able to give some families that are in need a small amount of financial support if they need to pay a light bill or whatever. So since we were able to take care of that part and some of other staff got her food from the pantry and so on. We saw a great improvement. Then one of the advocates started accompanying her to the school to get Mark tested, and to sit with the teacher to explain what is it this child is going through, how to help him. He needed more special attention when he is distracted than to say "Okay Mark, come back to the group." So she got that support from the staff and also with him coming to the after school program to help him with whatever difficulties he might have in school. I think Ms. Seacole started seeing change even though it was a slow process. He was able to socialize more and not fight with the other kids, not take away the toys and so on. It was a slow process. I've been working with her two years.

While the partnership [was formed], she set her goals. We knew it was definitely an ongoing process for her, to let her know that this if she's going to keep him with her, and this is not going to just change overnight. So it's just definitely an ongoing process. She was able to tell us what she needed. In the sense of financial support and all that. Now she's very self-reliant. You know she is able to maintain a job now. He's into school. They're doing much better. Yeah, I remember she would come in and she'd be tears almost every day.

I think too, at first she didn't even she wouldn't even consider medication. She had this strong religious and cultural belief that, "No I am not medicating him!" But being able to sit down and give her the pros and cons of it, not giving your view but just giving her the facts, she was able to say, "Okay, I now see where this is going. Even though those were my views, this

is what is best for him.” And she was able to make those choices. She’s made great progress. I see her every day during the week, Monday through Friday, when she picks Mark up from the after school program. We set it up so the school bus drops him off her so he’s here from 3-6. Mary will come in after work. It’s also respite for her that she gets to do what she wants to do for that time. So by the time she gets him at 6 o’clock his homework is finished, he had a snack, it is just to do her time with him. So I think that too is a great help. She gets off work around 4:00. She was even able to start a class over to [college name] Community College, which is just a few blocks away. With basic classes and so on.

I know once she told me she went to her citizenship class but she didn’t pass because she couldn’t spell her name. She got so frustrated and she just cannot, she blanked out. But when she was able to do it in a more relaxed atmosphere, she is able to function very well. [If she had not connected with me and this agency,] I think she may have done it later along the line, but she has a lot more help now [because of it]. I think it probably would have been stressful for her to go ahead and do it.

I try to encourage her. Every day she would come in, she would cry and asked to speak to me. It’s a constant reassuring; it takes time. Mark would come in and he’d be banging his head, he was all over. She said to him, “What are you doing?” and she’d get so frustrated. And I would tell her, “Just let him be. It’s going to take some time, you know.” He has severe emotional disorder. And ADHD. He had all of these medical diagnoses. OCD. ODD. She didn’t understand it, so she just having to come and [hear me say,] “It’s going to take time.” [I told Ms. Seacole,] “He needs hugs and to know that you’re there since it seems like everyone else just left him.” I just made her feel confident. It was okay to come here, we can meet with her about whatever concerns she might have, I think that put her at ease. She can see the process work slowly.

We were able to take her on retreats. We do a Sweetheart retreat every year for our families. No children allowed, just the father and the mother. We take them away. This year, we went to Pennsylvania Dutch Country. We spent three days away. We rent a bus. We pay for their babysitting. Everything is paid; it’s a great experience. She got someone, I think one of her husband’s relatives, to keep him. At first they didn’t want to because he has all these things but she was able to get them to take him for the weekend so they could go, just her and her and her husband. Oh, my gosh! I think, from after that retreat they renewed their vows. They’d been married a long time, 10 years. And when we do this thing at the retreat, we come together in groups to release stress and we do a lot of activities together, yoga. I remember in one of the groups she was saying how thankful she was that she is able to go on with her life and still take care of this child who has basically been dumped on her. So many times she thought of giving him up but just from the support she is able

to hold on to him and see him now flourish and grow into this person. You should see them now. It's absolutely great.

I think the medication is working fine. There are times that he has gone through phases, I will see a regress. He started therapy sessions. After one of those sessions I noticed a change in him, he will be talking to himself and kind of acting out. So that kind of happened for like two or three times, so I said, "Maybe you should ask the therapist if something was brought up in the session that is bringing out this kind of behavior." So she said, "Oh he's acting like that in church and he was doing good all the time." Ms. Seacole told me after, that in the session the therapist started asking him about his childhood. How he felt when he was locked up and all that stuff, and then he started regressing. It was definitely visual, you can see it. I think Ms. Seacole got so scared because she didn't want him to go back to how he was before! So I told her, "You see his potential! You know what he can do, so just be ready to show him the power he has, the potential. This is just a stumbling block for him. This is just a hump, he's going to get over it." I reassured her.

It is still a slow process with him. There are times when he is all over [the place], but there are so many other factors that go into that. I will say, "Mark, how was school today? Did you have a good day? Did anything happen on the bus that you need to tell me about?" There are so many factors that could bring him out. So that's what I try to let her know. She has such fear that he's going back there [as he was at first].

I think the first time she saw his report card that he's going to be promoted [was a special moment for her]. I think, in the back of her head, there was something telling her maybe ... he's going to succumb to this and that. Because everyone else is telling her all these things. So, when she saw his report card that he's progressing and he can read, she broke down in tears. He reads to her. You know, it's like they're working together. She told me that he helped her so much when she was taking her citizenship and test. He would tell her how many colors in the flag, and he's helping her along. I was there [when he brought in that report card]. Because every day he comes in with these little progress reports but that day when he came in, "Ms. Thomas, you have to give me a hug for this!" I was so happy.

That progress is slow but sure. I see the strength in that family. How they pulled together. That made me realize regardless of the cultural background someone has, you don't judge. You respect people and treat them as you want them to treat others, and just to work along with them. This family has definitely taught me more love, more patience to deal with my own nieces and nephew and not to blame them for everything. That kids are going to be kids. They do stuff. Not to always come down on them. It's okay sometimes.

I think this family has great, great, great potential. I look back and say, “God, that was Mark back there!” They labeled him but he is able to beat the odds and progress, with his grandmother right there, cheering him on.

His mother popped in once and I think that was one of the times he went off [emotionally]. She found where they were. She came back, brought Grandma her little three-year-old girl too, to leave her. So the grandma took her in. But within three weeks she came back and she took the girl. Mark was having a real hard time with that. Having bonded with his sister and all that. I know he was a really scared. He is always afraid of being abandoned.

It’s been a long process. I remember once the grandmother came in, she told him, “If you misbehave at school and I come here and they tell me that you’re not behaving I’m going to leave you there.” She threatened him! So when I got the phone call and she said, “Ms. Thomas I told him if he misbehaved like that...” I told her, “No. You just don’t say that to a child.” And he was behind me, saying, “Is she coming, is she coming for me?” I told her, “He has emotions, when you do that you are doing more damage to him.” But it was a slow process. Yeah. A great family!

Analysis

What is going on in this profile pair? What did we discover about the barriers Mary encountered and how her relationship with Ms. Thomas helped her overcome these? What did we learn about the family development process? Mary encountered many barriers, some stretching back into her own childhood. Her habitual response—work hard all week then devote weekends to her family—broke down when she discovered her grandson stranded in an abusive, chaotic house. This breakdown, coinciding with her employer’s refusal to help her find an evening class, precipitated an intersecting disorienting dilemma. When she quit her job and took her grandson to live with her, her savings were depleted and her marriage nearly wrecked. Mary reached out into her “human ecology,” in this case to her church, which referred her to an after-school program where they met Ms. Thomas. Although initially Mary had been in conflict with Mark’s teacher, through her conversations with Ms. Thomas,

Mary effectively brought her own common sense to bear on the school's perception of Mark's interactions with his classmates. Another example of Mary's effective interactions with systems came when Mary was granted legal custody of Mark; the judge told her daughter that she must seek permission from the court before visiting Mark at Mary's, but Mary helped the judge see another perspective.

Haja (Mother) and Ms. Doumbia (Coach): "The Police In Harlem Do a Very, Very Good Job"

When this researcher arrived in Harlem for these interviews, she complimented a woman emerging from a nearby tenement on her gorgeous, colorful, traditional West African dress. The woman, holding the hand of a young girl, smiled her thanks, then courteously responded to the researcher's question about the location of the Head Start Center. It was directly across the street, and the woman, who was going there herself, offered to show the way. After entering the Head Start Center, the researcher and her impromptu guide went separate ways. The researcher received a tour of the lively, well-run center, then interviewed Ms. Doumbia, another worker, and some parents. Close to the end of the day, the researcher was ushered into another room to interview one more parent, who turned out to be Haja. This chance encounter on the street offered a fortunate start in building a rapport between researcher and interviewee.

Fleeing Civil War in Her West African Country

Haja told the gripping story of the life-and-death struggle of her family in their war-torn country and her subsequent flight to freedom with her children:

I'm from West Africa. I came to Harlem because of the civil war back home. I came with my two kids, then I had another child here. I have three girls now. My husband was here already. He did elementary school over there and high

school here. His parents sent him and his older siblings to relatives here when he was 12. He went to high school and college here, then he went back home where we met and had the two kids. When he came back, he lost his job.

I had to leave my country very fast with our children. The day we left, a friend of mine from church called me when the war broke out. Banks and schools were closed. Everybody was in the streets. You hear that this family has been killed. Their house has been bombed. People kept moving from one area to the other. I realized it's just the grace of God that is going to make us survive so there is no need for me to go anywhere.

This particular day a friend of mine who is from a neighboring country, but living in our country, called me. He said "I have good news for you. They are sending us a ship from my country. I want to go with you like my wife and your two kids will be my children. Because they allow only citizens of my country to go." I told them that in the U.S., Immigration lost all my papers. They say, "Then your husband will go and you and your children will stay." I was so scared because people left for the boat but [the soldiers] took them to the army barracks. A lady was gunned right in front of her husband. She bled to death. So it was a life and death situation for me and my children. I either had to go Ghana or I have to go and face them. By then my kids were scared to death. I said, "No. If anything happened to my two girls, I just can't stand that for them." The soldiers didn't care. They were killing kids, ripping them, just leave them there to die. Horrible.

They are so young. They really needed to leave the country. When they went to school they saw dead bodies in the streets. The morgue could no longer hold the dead. The place was stinking. You saw dogs eating human bodies. Nobody have time to bury them because everybody's fighting for their lives. We wake up in the morning you see the holes and the bullet shells laying right in front of our door. When we went to sleep at night, maybe the bullets come find their way when you lie down, go through all this to meet you. There was nothing like "young" in my country.

They killed my uncle. They killed my cousin. They kill a lot of people in my family, we lived in the same house. They went out, they never came back. They say, "They finish the body, look at the clothes to identify that this person." That is the only way you know they died. You have to go and identify the clothes. The body, well it set over there and the birds just come so when you go maybe you will see bones and the clothes but you will not find the body.

So we be living in constant fear, you know. No innocence anymore for the children. So when the guard told me I had to go to [place name] to get clearance, I stood over there. I said "No, people don't get clearance in [place name]." I know exactly what people get there. I was thinking about my

daughters. Not about me now but my daughters. I was crying and praying, “What am I supposed to do now?” I knew it was a life-and-death situation.

My friend said, “The boat is here we have to go.” I told the kids how to behave. My kids said, “We understand.” Then, this teenage boy just come in, he said “why on you crying?” and I said, “I want to enter the boats, but they will not allow me to.” And this boy—I don’t know him from Adam—he went straight to the official he said, “Oh what’s going on? That’s my sister. Take her stuff to the boat.” I went in the boat. I saw people go back to their houses to get their things. They say, “Are you not going home to get anything?” I said, “Me? This is the first night I have laid down with no bullet passing through my feet. I am not getting down from this boat.” We stayed in that boat for seven days. We were very, very hungry. It was a cargo boat. We had to sleep down under. The United Nations gave us blankets. I kept my children close. When we got to [place name], they sent us to a big stadium and the United Nations gave us mattresses and tarps. We built two tents, one for the men and one for the women and children. At night, we see the husband and wife they go out.

Twenty Months in the Wilderness, Killing Snakes and Scorpions

The night I got there, some people were calling their relatives in America. I didn’t have money, but I said, “Can you please call my husband?” They say, “Sure.” I gave them the number. He was so happy! He had heard I left on that boat but all the time we were in the refugee camp he hadn’t heard anything. He had called back home but people over there they said, “We haven’t heard anything, people said she left.” I said, “Send us emergency money. We need soap, toothpaste, the basics. When we were in the boat we vomited on all our things. We need to wash our clothes.” He said, “We are going to do that immediately.” He sent us \$100. We went to the Western Union. They give us the money. We bought soap, toothpaste, food for my daughter, who was not eating because the food was fermented corn. Later on, the United Nation gave each family a house in [place name] wilderness. Oh my God. We were the first people to live there, in the middle of snakes and scorpions. I killed so many snakes. I had no choice. We stayed 20 months.

Establishing a Life in Harlem

My husband went to the Lutherans and said that his family had fled the war. They said they are ready to help because they are interested in uniting families.

They brought us here on in a very beautiful airplane. We had never seen good food since we left home. We came to JFK at 1 a.m. in the morning. My husband was there to meet us. He was so, so happy. That is such a big relief we got through safely. In the restaurants coming over my kids saw everything on the table, and couldn’t believe this was for them, they put the sugar packets in

their clothes. My husband said, “Why did they bring this?” I said, “We didn’t have access to eat so this is really luxury for us.” He cried. He had an apartment so we just moved in and started life again. We stayed home that weekend then we start them in school. We started sleeping like human beings.

Post-Traumatic Stress Syndrome

I had to go through therapy because I would see a soldier even over here, I would get so scared. People would tell me, “No, It’s okay. They are not killing people here. This is a safe country.” I had post-traumatic stress syndrome. Everybody had to go to therapy. The nightmares—I am thinking, “When are they going to go away?” It’s a long time but it’s fresh like it just happened yesterday. I pray a lot. That is the only thing that help me. I go to church across the street. It’s really hard. And some of my friends I knew, I didn’t even know they died. I came over here and I went on the internet and saw their names, and I said, “Oh, my God!” It’s hard. A bomb fell on them. They were shot. Their throat was cut, something. It’s just horrible. You know, I see the picture so clearly like the day just happened. I see the picture so clearly. I see everything around me. I see how people are dropping dead, I see it so clearly now.

Bringing Her Parents to Harlem

Now we’ve been here six years. On the whole, life has been good. My parents are able to join me over here. I was able to get them out because they fled to [place name]. Unfortunately, we were not in the same place. When the war broke out I could not contact them and they could not contact me. My mother, she don’t know my whereabouts, nobody knew because there was no communication. My mother met someone living in the refugee camp. My mother said, “I know they attacked [place name] and kill a lot of people. I don’t know what’s happened to my daughter. They said, “What’s her name?” This guy said, “Your daughter she went to America.” He told her, “I know somebody I think knows her number. You want to talk to your daughter? I have her number you can call.” That morning I just woke up. I was tired. And I received this phone call—my mother’s voice! She was just crying on the phone. She could not say anything. And I said “Did anything happen?” She said, “I am really thankful. How many years I haven’t hear anything.” She started telling me all the people that died. The first place that they went to hide, my cousin got shot and my uncle, her brother, they cut his throat with a knife. She was just telling me about people that died, you know, we were just talking and I was telling her my experience in the camp. We are talking and talking.

After we finished talking, the lady in the telephone booth said, “Please call me back on this number because I really need to talk to you. Call me in an hour.” She wanted my mother to go away so she can tell me about her condition. She said “I think your mother walked hundreds of miles, she has

water coming out of her feet. You really need to do something. If you have money send it immediately. She needs to see a doctor otherwise she is going to die. All she wanted to know was that you and her grandkids were alive. She's not even thinking about her condition." I told my husband. He gave me some money and I sent it. She saw the doctor, and the people in the telephone booth they kept giving me the progress. Now she is able to wear shoes. Her feet size went down. My mother, my father, and my two brothers came over here.

My mother has diabetes. We have been treating her. She have been controlling her diet. She's fine. She lives with me. She is taking English classes, and she's planning to take the home health-aide course. She is 55. I am 38. My children are 5, 16, and 17. My husband goes back and forth, but he has been over there for a while now. I'm basically on my own now, with my mother and father. They are doing fine. When I hear people here complaining, I say, "You haven't seen anything."

In Harlem, the Police Keep the Peace

Throughout this lengthy interview, two aspects of Haja intertwined. Haja and her family worker, Ms. Doumbia, formed a mutually respectful and productive relationship. Haja had set and reached several daunting goals since leaving her war-torn homeland and settling in Harlem. Family, friendship, and faith helped Haja survive and start a new life. Haja expresses no fear of the streets of Harlem, which she found a haven of predictable safety compared to the terror she experienced in the last years in her homeland. Yet, six years after arriving in the United States, and therapy for post-traumatic stress syndrome, Haja has continued to experience terrifying flashbacks, and to wonder when the nightmares will end. She has found joy in having her family together, and solace in prayer.

Discussing her goals with Ms. Doumbia, and writing and pursuing them, has brought a sense of progress and well-being into Haja's life:

I write them because that is a way of me finding out how much I complete. When this goal is complete it, I just tick it off. So, at the end of the year I can look through something and say, "Wow! I had 12 goals; well, 10 of them are

accomplished—that is good.” I really like that. Even the short-term goals. Even if I am thinking, you know what I might have a tight schedule but this week I have to finish this. I like listing them down. So, by the time the week finished, I tick, tick, tick, tick.

Haja has accomplished her goal of getting into college, where she was studying the urban scene in which she has been living. She has been determined to write about her experiences, so she can leave a legacy for her own children, as well as give a gift to the United States in gratitude for welcoming her and her family. For Haja, ticking off her accomplishments now seems to bring a positive sense of order and control in a life in which horrific memories barge in unannounced.

We live right here in Harlem. When I see a policeman here, believe me I have so much respect because you can rely on the police over here. They are keeping peace. They are doing a very, very good job. Like something happen here you can dial 9-1-1. Back there, you got nobody to call. When something bad happens, it just happens.

Working on Goals with Ms. Doumbia

My life here, I had been working, but I just lost my job. I’m currently on unemployment, but I’ve been doing different jobs through this temporary agency. And I go to the college of New York City. My daughter goes to Head Start. When I first met with Ms. Doumbia, she asks, “What are your goals?” Well, my goals are to go back to school, to improve my life. They brought me here to this country I want to write about my experiences, for the children to know. I just want to leave my own gift to this country. So, the young people coming up they will actually read something that is from me and even if I grow old I die someday, you know, I just think that I live in my own country that I’m legally supposed to be and people drive me out of my country. They make it impossible for me to live over there. America opened its arms. They receive me here and I feel again like a human being, and I can actually raise my family here. I really want to do something, so that even when I no longer exist, America will see that they brought somebody here that was a refugee that came to New York. You know, we have proof that this person was here. So children understand your story. That’s my goal. I did not elaborate with Ms. Doumbia at first, I just say I’m going to school. I want to improve my writing. I just walk over there to the campus. That’s something I wanted to do long, long time ago.

Realizing a Dream: Going to College

I don't pay to go there, because they look according to peoples' income. I don't make that much income, so TAP and the PELL [Student Aid] are covering me.

I'm going to summer school now. I'm taking "Urban Community." I'm very, very excited. It's like a life fulfilled for me. Back home, I finished high school. After high school, I had my children.

Giving Back to Her Children and to America: Writing Her Story

But now, I really just want to do something. I want to do something to show appreciation to this country that made it possible [for] me to live there. They opened their arms and received me. I am very, very appreciative to America.

I hear a lot of people say that this is a tough neighborhood. I don't. These people here, they are living their lives. If you are respectful, they don't care about what they do. It is between them and the police. And I am not the police. I respect them when I pass. If I can say hello, I say hello. And they don't bother me and I don't bother them. Same as when I met you on the street today, I didn't know yet that you were the person going to interview me, but you treated me respectfully. I treated you respectfully.

In five years, my youngest daughter will be 10 and my oldest daughter will be in college. And my second oldest will be preparing for college. I will be in graduate school.

Ms. Doumbia listens, we do not speak lengthily. I just telling her how I'm trying to improve myself, like to go to school. For everything I want to do, I write it down. Normally, even my short-term goals. I write them because that is a way of finding out how much I complete. When this goal is complete I tick it off. So, at the end of the year I can look through something and say, "Wow! I had 12 goals; well, 10 of them are accomplished—that is good." I really like that. Even the short-term goals. Even if I am thinking, you know what I might have a tight schedule but this week I have to finish this. I like listing them down. So, by the time the week finished, I tick, tick, tick, tick. Oh, my God!

I'm in school now. My mother is getting ready to go to a three-week school; when she finishes she will have a job. My two brothers start school in September. I started writing. Something come up and I just start writing it.

With Ms. Doumbia I talk about my child. Because when my child came here [to Head Start], she was having a problem. Not only when she came here, but before when she was going to the babysitter. The babysitter used to tell me,

“This child, she’s like hyper.” When I came over to Head Start, they say, “We are studying the child, maybe she having a problem.”

So, what I did was I created a network within here. I was talking to Ms. Doumbia. I was talking to the people in the office, I was talking to the social worker. I was talking to the teacher and I said, “My daughter is just a child but she’s a human being. Let us all just talk to her. It’s up to her. And see what happens. Every morning before I go to work I talked to her.” I said, “Hope, you did so and so in school and that is not good behavior,” and she say, “Mommy, I understand.” And I said, “Don’t do it again.” [When] I come from work, I ask, I say, “How did you do at school today?” and she tell me. And you know, after some time, I stopped having bad reports. They say Hope has changed. No more trouble. She’s doing extremely well. You tell her once, she understand. Now I am so happy. This is her last year here, she will be going to kindergarten at a very good charter school, English and Spanish.

Before I met Ms. Doumbia, I went to the city for help. They definitely be different. The city will only give you something as the last resort. When you go there, they think, “Oh, it’s just one of them. They are lazy, they don’t want to work. They want to use the city.”

The “Aroma” of a Family Worker: Parents Feel Comfortable

Here [in Head Start’s Family Development Program] the family worker here always supposed to have that kind of aroma around you where a parent should feel very, very comfortable in talking to you about the child because unlike the teacher or the director or the principal, the family worker is supposed to be directly connected to the family. So, just that name family worker you are supposed to have that air around you.

Ms. Doumbia, she’s open.. This has been so wonderful for my baby. Now she was drawing and she said, “Mommy this part is for you. Mommy, the book is talking, come and read that book to me. Mommy, where is the dictionary? I need to learn more new words.”

Family Worker Ms. Doumbia

Ms. Doumbia introduced herself by reflecting on her own roots:

I’m from West Africa. I came to Harlem in 1999. When I was back home most of the schools were closing because of a strike. My family figured it would be good for me to continue my education some place else. My older brother was here so my parents sent me here so he could look out for me. They were thinking about my safety and well being. My brother wanted to send me to high school but I said, “No! I’m not going to any high school.”

So the only thing I can do is go take my GED. I could read and write English, but the speaking part it was kind of hard. My teacher used to say to me, “You need the language [practice] but you don’t need to be here. Go and try to take your GED.” And that’s what I did. When I passed my GED, then I did six months of college preparation class. I met my husband. We got married. I started nursing school. I liked it, but I had to drop out because I was pregnant with my son. Now he’s two. I couldn’t go back to school because my husband was in college. I came to work here at Head Start. I have three classes to go to finish my Associates degree.

Being a Head Start Family Worker: Welcoming Parents “With My Hands Open”

The way I was raised is my grandmother used to tell us that whoever person comes to our house, you should give that person much respect. When I first started working at the Head Start center, this center is [like] my house. I should be able to open my door to everybody and welcome them with my hands open.

Helping Haja Set Goals

Ms. Doumbia reflected on her work with Haja:

This mother [Haja] has been through a lot. We talk about it some. She came in saying, “I need to register my daughter.” We did the intake, all of those things. We start talking and she told me that she was from Africa. She told me where. I told her “My mother used to go to that country.” And she said, “Yes, I used to go to your country.” And we became friends. So when they were having some type of problem in the classroom, I became her family worker. The mother was going through some stuff with the child’s big sister.

We sat together and she told me what she wants to do, and I said, “Good.” Other times, I was just encouraging her. The decision wasn’t coming from me. [I told her,] “That’s your life and you know what is best for you.” We sit together and we find, we create a plan.

This mother wanted to go to school, and also she wanted to have a better job. We sat down and set the goals, how she be able to reach her goals. She went back to school which was a good thing and also she wanted everybody [in the family] to improve their lives. Later when I asked her about how everybody’s doing, she said, “Oh, everybody’s fine.” The problems she was having with the big sister, everything worked out now. [Older] kids cannot understand why mommy doesn’t want me to be outside after it’s bedtime. Sometimes that creates some situation at home. That was never the way you were raised, but when you enter another country, you have to change your

mind and follow the trend. In Africa, if your mother told you can't go, you cannot go. That is the way it is.

Since I took the FDC credential, I'm a better listener than before because I kept running my mouth and now, every time a client comes to me and just talks. I will find a nice place for us to be comfortable and I will listen to you. When you finish talking I will tell you, "I'm not going to tell you what to do." [I told her,] "What do you think you will be able to do?" I give them a choice about writing their goals. When she wrote her goals, I can see what a difference that makes. That came from her. All those goals made came from her it did not come from me. [I told her,] "They're your goals, and you're the one who's going to tell me which step to take to achieve them." And that makes them accountable. I was like, "What do you want in the future? What do you want for your life and for your kids?"

Although Ms. Doumbia also left her West African home for Harlem, she avoided the kind of chaos and terror that Haja experienced, probably because her parents were better educated and had, at an earlier point in their lives, become U.S. citizens. Of her work with Haja and other parents, she said,

Since I took the FDC credential, I'm a better listener than before because I kept running my mouth and now, every time a client comes to me and just talks. I will find a nice place for us to be comfortable and I will listen to you. When you finish talking I will tell you, "I'm not going to tell you what to do." [I told her,] "What do you think you will be able to do?" I give them a choice about writing their goals. When she wrote her goals, I can see what a difference that makes. That came from her. All those goals made came from her it did not come from me. [I told her,] "They're your goals and you're the one who's going to tell me which step to take to achieve them." And that makes them accountable. I was like, "What do you want in the future? What do you want for your life and for your kids?"

Analysis

What is going on in this profile pair? What can be learned here? Haja has encountered—and overcome—profound barriers and challenges as she set about pursuing her goals. In escaping civil war in her African homeland, Haja witnessed the execution of many family members and neighbors, thinking she and her daughters

would be next. But through the kindness of a fellow church member, as well as that of a young stranger, Haja and her daughters escaped, only to be forced to live in an uninhabitable wilderness among snakes and scorpions and eat inadequate food. They eventually were reunited with the husband and father, who brought them to the United States. Despite the lingering nightmares, Haja overcame many barriers. She and her husband had another child. Haja went to work at Head Start, found her parents in an African refugee camp, got them medical care, and brought them to Harlem. She enrolled in college and began writing about her ordeals, both as a way of salving her pain, but also to create a legacy. Haja's experiences led her to consider Harlem a safe haven where "the police do a very, very good job."

Working with Ms. Doumbia has encouraged Haja to set and reach many goals despite formidable barriers. Ms. Doumbia appears to have used the steps of Family Development (Forest, 2003) to form a mutually respectful relationship with Haja, then helped her set her goals. She created a comfortable environment in which to be heard but refrained from telling Haja what to do. Ms. Doumbia helped Haja pursue her goals of going back to school and writing about her experiences, and listened to her accounts of her challenges with her two daughters. She saw how satisfying it was for Haja to complete her goals.

When interviewing Haja and Ms. Doumbia, this researcher was struck by each woman's graciousness and flowing West African dress. Although Haja was the mother of three children, including two teenagers, and Ms. Doumbia a younger mother of one child, when Ms. Doumbia introduced Haja to the researcher in a crowded interview cubical, together they exuded a numinous humanity that seemed to transcend an

ordinary worker-client encounter. They had each traveled a long way—in both miles and experience—to be there. Their relationship seemed deeply meaningful for worker and mother, part of the good life they had both created for themselves in the United States. The West African cultural mores eloquently articulated by Ms. Doumbia, and practiced by both Ms. Doumbia and Haja, appear to represent a positive cultural adaptive exchange between them, and between each of them and the Head Start Center and its Harlem neighborhood.

Haja's success in realizing her dream of going to college contrasts with the inability of her rural counterparts Jessica and Lynn, whose efforts to enroll in college were stymied. Perhaps one major difference was the availability of transportation. In New York City, the subway system renders the entire city readily accessible, whereas in rural areas a car is a necessity.

Christina (Mother), Rudolfo (Father), and Sympa (Coach): “Starting Family Life in a Homeless Shelter”

Christina began the story of how she, her husband Rudolfo, and their baby daughter came to stay in a homeless shelter:

We'd been going out for like a year and a half. He was my first whatever, you know, and then I got pregnant. My mother was moving, so my father offered for us to live with him—he'll help us with school, we don't have to pay no bills—it sounded alright. I was getting my room back I lived in since I was three.

So I was like, “Alright, I don't mind ... my father's nice and everything.” So me and Rudolfo moved in. Things were alright in the beginning but he started like, catching attitude with us, so we couldn't take it no more.” Rudolfo adds, “Me, I left two months before. I stayed over at a friend's.” Christina added that once the baby was born, “My father wouldn't let us get together. He wouldn't let him call up on the phone—nothing.” Two months later, Christina's father still hadn't allowed Rudolfo to meet his

daughter. The young mom “also had post partum depression when I gave birth, so my father put me in the hospital; it was, like, psychiatric, but I wasn’t on no medication or anything. The baby was with my father, who was, like, just making me go crazy. For two months I was living like that, and I just got a new job working in a deli, I wanted to enjoy my new job. Rudolfo was gone, my father was on me every day. I never ate because I was so depressed, I was real, real skinny. Like my father was bothering me every day, he was guarding her, I couldn’t even take my daughter outside. I couldn’t call Rudolfo, I couldn’t do anything. I couldn’t even take my daughter to the front of the building or like that, because ATS said that I couldn’t be alone with her. My father made sure I never took her outside.

I called my ATS worker because she’s nice, so I said, “It’s my first paycheck; can I go get it?” and she said, “I don’t see a problem with that.” You know, I want everybody to see my daughter at work, so I felt good that day. When I told my father I was going, he started to go crazy [and said] that he’s going to get my baby taken away from me because he’s already got his taken away because of me and, you know, he, like, drove me crazy that day.

Meanwhile, Rudolfo decided, “Two months without seeing her, I can’t stand it no longer, I don’t care if the man says he’s going to kill me, that’s my daughter, I’m going to go see her.” Christina was waiting on the stairs: “I just took the baby, ran out the house and I showed her to Rudolfo. I put the baby right in his arms. That’s the first he saw her.” Rudolfo remembered that moment: “I took some flowers for them two, and that’s when he put the knife to my throat with my baby in his hands.” Christina recalled,

My father was cooking dinner, he came out with the cooking knife and put it to Rudolfo’s neck and says, “I’m calling the cops and you’re getting arrested because of the ATS.” It wasn’t the first time Rudolfo had been attacked with a knife; “some dumb kid” stabbed him seven times when Rudolfo was 16 “because he was jealous about me.”

Christina’s father held the knife to Rudolfo’s throat, and pushed:

My father called the cops but they arrested *him*. I left the baby with my stepmother when we went to the precinct. I wasn’t going to let Rudolfo get arrested for him coming to see his daughter, but we didn’t press no charges.

When we came back it was like midnight and in the morning I took my baby, got all her clothes and went across the street to my mom's house.

My brother's girlfriend offered to watch her until I find a place to go. She's my best friend. But my brother said, "I'm going to slap the shit out of both of you." My brother and his friends and my sister-in-law jumped me and Rudolfo. She said, "Go, it's a trap. They're trying to take away your daughter. If she thinks somebody's doing something wrong she might pull a knife or her little cop thing she calls a mega beater." They fought a while.

The baby was there with my grandmother, who is a very nice lady, and my niece is 3—she was crying. When she gave me my baby back, I left and called the cops, they sent an ambulance. They took it real serious because the baby had like blood on her white coat. We stayed at my mom's house and then my father felt real bad; he's like, "I'm sorry." I got all the baby's clothes, then the cop gave me the number to call for the shelter, and that's how we got here. We've been here two months. From the first day things were way better. I'd rather be here than [have] everybody treating us like kids; you know, we're not kids anymore, we got our own to take care of.

The young parents, who each dropped out in 11th grade, reflected on goals.

Rudolfo said, "I want to be a teacher." Christina wanted to get her GED so she could get into college.

I got tired of school. My friends were older, like they already finished school and they hang out every day. And I was more thinking about hanging out than finishing my last year of school. That's why I had my baby, to make me, like, responsible, so I could have somebody to be responsible for. That's why I wanted my daughter. Like, I'm happy because I didn't feel like going to school. I feel like doing a lot of things for my daughter, because one day when she be like, "Mommy, I need a new pair of jeans," I can say, you know, like, "Well, come on, let's go get it."

[And if she ever tries to drop out of school,] I'm going to tell her, "You don't go to school, then you ain't getting no money." I'll make sure she loves school and wants to go to college or in the Army, because I was supposed to go in the Air Force when I graduated. I wanted to be an air traffic controller. I was already enrolled in the Air Force, they was just waiting for me to graduate. I was signed up, I had my recruiter and everything. But, like, I was 17, I was immature. If I go back there now and tell them [I want to get a GED], they're going to look at me like, "What happened to you?"

Yeah, I want, like, a steady job. I'd like to take a city test or state test so when I get my GED, I can work for the city, maybe a police officer, you know. I've got to find a babysitter, welfare pays for it, but I don't want to feed off their money. I never seen myself on welfare, but right now I need help to go to school so I could become something one day. Everybody pays taxes, so that's what I want to do one day. I need to find child care and welfare will pay for it.

Rudolfo added with a chuckle, "She wants something, she gets on fire! And the baby, in five years she'll be in kindergarten and she'll be seeing mommy and daddy work, so whenever she needs something for school..." Then he became pensive:

Through this process, I've learned to be responsible, and not end [up] back over there. Welfare just wants you to go to work, but what are we going to do with a \$7, \$8 an hour job for the rest of our lives? If we don't get an education, our lives be miserable. Can't be nothing good in your life. We've got plans of our own, you know, to have a good life, not the best life in the world but a good life, with a good job.

My father, he likes to work. One time when I was a kid, I told him I wanted to be a taxi driver and he's like, "No, that's not good. You see how I do, I work a lot to get the most money I can to live the best life I can. You know the best thing you can do is get an education, and then you work less and you'll get more money." Now I see what he really wanted to do. Now I believe him.

Family Worker Sympa Crima

When asked to choose a pseudonym for the interview, this credentialed coach, an educated man who immigrated to the United States from Haiti and spoke several languages, including French (and therefore presumably understood the term "pseudonym"), responded, "You mean like a '*nom de guerre*'?" The researcher, aware that Haiti had experienced a civil war under an oppressive dictator during the 1970s, complete with freedom fighters who sometimes used a *nom de guerre* (war name), replied, "something like that." The credentialed worker offered "Sympa Crima" as his interview pseudonym, which the researcher understood to translate as "Robin Hood."

“When You Go into the Shelter System, You Can’t Look for Convenience”

Sympa Crima reflected on his work with Rudolfo and Christina, and his work overall:

When the family came in, she was reluctant to talk because she didn’t trust. So, the first thing I did was to greet the family. I ask how they are doing and they say, “Not so good.” I say, “I don’t think you came here by choice. It was a wise decision.” [Later,] I sit down with the family. They say they weren’t allowed to cook; they weren’t able to do this and that. I tell them that this place is not a cooking facility. I tell them that I don’t think they should reverse their decision without thinking about the consequences.

I say, “When you go into the shelter system, you can’t look for convenience. A shelter is a shelter. They are rules and regulations, a curfew, times to do things.” It is a controlled area, people don’t want to be controlled. The best thing is to be focused on your goal, to [move to] your own apartment. Move forward. After a few days, you will love this place because people are really helpful here.” I helped her understand the situation she was facing.

Sympa Explains the Shelter Rules to the Researcher

[First the family is classified as conditional.] That means you can stay for ten days. When the ten days are over, the system makes a determination whether or not you are eligible to receive temporary housing assistance. When you become eligible for THA [temporary housing assistance], I start working close with you. We do the first assessment, go over everything: school, job, welfare, housing, health—anything that will be causing a problem for the family. After two weeks, the family comes back. We review what we did last time, and what they’ve done [in the meantime], and what needs to be done next.

This family comes and we go over everything. I met with them three or four times [checks his notes] to evaluate their situation. We go over what we have done. There are things that the family must do before [we] meet next time.

I remind them that in [month name] she will be here 90 days and tell them they need to go see the housing specialist. I remind her to make sure she doesn’t miss that appointment. Also, welfare. Welfare asked them to go to a job training program. They must go because [they] don’t want to have the case closed. If a welfare case is closed, they won’t help with housing. I tell her even if she doesn’t feel like going to any job program, they must report to the place and let them make that decision. Because if you make that decision on your own, you receive a letter that your case is closed. They don’t want that to happen. We go over and I remind them about what needs to be done.

The family and housing specialist work together because without the welfare case the family cannot move. I monitor the welfare case because I have access to the system to check the status of the case. After 90 days, the housing specialist writes a letter and sends it downtown and gives the family a letter acknowledging that they are eligible for the program. There is also an aftercare program. That is from the Department of Homeless Services. Aftercare starts from 90 days to six months after they move. There are people tracking the family to see what she or he is doing. Because they want to make sure the family complies with welfare, whatever it is to keep their rent paid. Otherwise, they might cut their welfare and the family will come back [to the shelter].

Another important thing, many families look at the number of days they are here. [They know that] after 90 days in the system, you become eligible to look for an apartment. So, when they have almost 90 days and say, "I'm leaving, I'm leaving." They are very happy when this time comes to meet with the housing specialist to start looking for an apartment. [Here in the shelter] want to go to their [own] house. That's the main goal.

A few of them have what I would say noble goals. But most come here because they are not mature or they left their parents' house because they are over 18, so they can do whatever they want. That's a big part of it.

People without Diplomas Should Not Leave the Shelter

If I was asked my opinion about when it would be appropriate to discharge somebody from the shelter to independent living, I would say the program should be at least six months [not the current three months]. Whomever doesn't have a diploma or trade diploma, should not leave. Because besides maturity, there is a preparedness issue. They are not prepared! Here, welfare pays everything for you. When you move to an apartment, you have to furnish your apartment. Even toilet paper. If you don't know how to manage an apartment, you end up back in the system.

Welfare is a five-year plan. Every year they cut it back 20 percent. So you have to come up with the difference. If you're not prepared to work or not qualified, you can only get a minimum wage job, which means you can't make it. I will never dictate what that person must learn, but I would give them a variety of things available to learn. It could be computer or culinary classes; whatever it is, you must come out with something before you go out.

"The Most Important Thing is the Relationship with the Family"

In my work, the most important thing is the relationship with the family. They want somebody who is able to listen to them. Because sometimes the family

doesn't need anything expensive, but they need emotional assistance. One time I was working overtime, and a lady came in and said to call the ambulance. I asked what happened. The lady said, "My child has an allergic reaction to something." [It was] 11:00 p.m. I asked her to sit down. I told her we would call the ambulance and everything would be OK. She calmed down and I called the ambulance. They came and took her son to the hospital. When I came in on Tuesday I went to see how she is doing. She was so happy because her child was better; they gave a shot and some pills. You could see the child's face was splendid and happy. She was very happy because I called the ambulance and she got results.

Another time, a family was in one room and we had had to move them to another room because there was a leak. That lady was pregnant. So I made arrangements to transfer them to another room. I told her the room she was being transferred to wasn't my room and she would have another worker. She said she didn't want another worker because she was used to me and she knew I loved her son. She said that whenever her son sees me, he calls out for me. She could tell I love kids. When kids come here, they often start to act up. The first thing I do is say, "Listen. Sit down and I'll give you a piece of paper and some crayons. I want you to draw me a dog." I keep the child busy so I can continue working with the family. They like that piece of mind when they come here. I don't say to the mom if she can't control her kid to get out.

"When You Give People Respect, Most of the Time You Get Respect Back"

[As a family worker,] what I learned generally is that when you give people respect, most of the time you get respect back. Maybe not all the time. As a worker, you may find people who don't appreciate the work you do, but a few of them will make your days. This card on my desk—this was sent by a family who was here. Every December she sends me a card. She wrote, "Thank you for everything you have done for my family."

"I'm a Straight Talker"

[I try to be] truthful and straight-talking. I'm a straight talker. One lady found an apartment and the rent was beyond what welfare was willing to approve. Since she was working, she wanted to pay the difference. When she came to me, she said she found a nice apartment and she really wanted it. But it was \$200 more. She said her baby's father was willing to pay the difference. I said that was great, but I asked her why he had left her to come to the shelter. I told her I couldn't dictate what she should do, but that I wanted to be truthful. I told her today might be her honeymoon day with the child's father; he wants to pay that money for her. I said what happens tomorrow if he is not satisfied with her or if something comes up and he doesn't want to pay. I asked her would be able to pay. I said I didn't want the answer right away. I wanted her to think

about that question, digest it, and come back and tell me what she thought. She came back and said she appreciated my advice and that she took it seriously. And she decided not to take the apartment. And I said I was glad she made her own decision. I didn't want to tell her what to do, but that I was there to advise her about what might be best for her family. But that it was up to her to make her family's decision.

How Sympa Crima Learned to be a “Straight Talker”

I'm a religious person. The Bible says that if you have something against someone, don't send a message. Go straight to the person and tell them your feelings. And also I have a Bachelors degree in social work. I remember one of the chapters of the FDC training—the “I statement.” That helped me. As a religious person and a specialist in human social services. I have been in the field for a long time. Different types of human reactions and behaviors. I am a father so I can understand someone who has kids.

I would say working with families gives you a better picture of the outside world, because the family has all the components—kids, adults, male, and female. From this, you can observe all types of reactions; for example, how the child reacts to the mother. That helps you understand. What you see with families is not different when you go outside in the world, because people are people. People have problems, but they always have solutions if you sit down and take time to look at them.

One thing I liked in the FDC is the chapter on cultural competence. It was a very strong chapter. In New York [City], there are almost 20 languages spoken. So that means you deal with a variety of people, of cultures. If you are not culturally competent to face that, you might shock people or get shocked. You need to learn there are people that are different from you. I think that is a very important chapter in the FDC training.

“This Country Is a Bridge Where We Met”

[I'll tell you a story about that.] I'm from Haiti. I speak French, Spanish, Haiti Creole, and English. When I came here, some clients said they didn't like my accent. I would tell them my name and I would say their name. I say we are different (laugh). I was born outside the United States. I tell them this country is a bridge where we met. One lady was born in Puerto Rico. When another client came in and the lady saw me speaking Spanish, she was surprised. She changed her attitude because she realized I spoke many languages.

Sympa Advises His Coworkers to Take the FDC to Learn Cultural Competence

Some of my coworkers say “Speak English,” but what they mean is that I don’t speak good English. I tell them they need to go and take the FDC class (laugh), because they don’t know how to appreciate somebody else’s skills. I advise them to take the FDC because I think it can teach them cultural competence.

The FDC: “Let the Family Make Their Own Goals”

The second thing I learned from [the] FDC is they ask you not to make goals for the family, let the family make their own goals. But the way the system is built, they make you believe you have to set all the goals for the family. So, the first time I see the family, I let the family write something if she or he can. Some questions, I don’t answer them, I let the family answer. And then when I do the assessment, I turn the computer around so they can see what I write. As we look at the computer, I say this is what you said last time. We do it together. I don’t do and then give them the paper and have them sign it.

Most importantly is how you involve the client in the process. The form is in the computer for convenience. You can always shape it the way you want it. But if you keep doing it on your own and only have the client sign it, there is no participation. I worked with a couple, they were fighting. So the first thing they said was they wanted to go to a counseling program. I put it down as a goal. The next time I saw them, I said you said you wanted to go to a counselor. What happened? We called the place, then what happened? They say they didn’t go. They say they have problems because they don’t listen to each other. We yell at each other. So we decide to work on our own, and if we can’t work it out, then we will come back and go to counseling.

So I change the information and write that the family want time for themselves to work out their differences and will make a decision about counseling later. So, then you involve the family. If you suggest things, she may tell you “yes” to everything, you’ll decide and they’ll leave. Next time they come, nothing will be done.

The most challenging part of working with families is when you have a disruptive family. When you have someone who stays here, you cannot force that person. You can persuade, but if that doesn’t work, you need to have a last resort to use to bring the family to get something done. One of the challenges is your hands are somehow tied when it comes to pressing the family to do something. Work or going back to school. We need to have the tools to make them do it. Because I believe in give and take. I will put every means available to you. But I need your willingness, your motivation. So, if I say what I expect, but as a worker, I can’t tell somebody something I can’t

enforce. If you can't enforce something, don't say it; otherwise, you will lose face. So that's a handicap.

There is no consequence. If the family rejects an apartment, they may be forced to take the next. I don't know if that really happens. As a worker, if I curse, there is a consequence. If a client comes here and curses, there is no consequence. You can give warning notice after warning notice. The worse consequence is to transfer the family out of the shelter. So if the family doesn't like it here, she can get a transfer by being inappropriate.

Most of the people [in the shelter] will sign anything you give them. It doesn't mean they will follow it.

FDC: Family Strengths

In [the] FDC, instead of being negative, we try to enforce the strengths of a family instead of just looking at the negatives. That's important. That was a very good chapter. Generally, if you open a newspaper, you always see the bad news on the top. Because bad news is a business; people are nosy, they want to know. And the good news is in a little corner of the newspaper. If you don't read a lot, you won't see it. Society does that sometime for people. They always try to put you down instead of lifting you up. Which is different in the FDC training point of view. Everybody can get a chance to repair a mistake and move forward. There is always a dream somebody can achieve. Instead of putting down people, lifting them up. I tell that to the families.

"Though You May Be Homeless, You Should Not Be Hopeless. You have dreams."

Even though you may be homeless, you should not be hopeless. You have dreams. If you can learn from your mistakes, you can move forward. And today when they move into their own apartment, they appreciate what they have. Maybe before [they became homeless], they didn't care about what they had. [At the shelter,] they learn to follow the rules. They do whatever they need. I think it is important to help people learn from their mistakes but not to tell them they are not good.

Working with the Decision Makers

When you work for the government, you have rules and regulations. No worker can change the rules immediately. You can try to work within the rules and when you have chance, you can meet with the decision makers, you can express what you think.

Analysis

What is going on in this profile pair? What can be learned? The violence Rudolfo and Christina encountered within her family, combined with their own lack of high school diplomas, represented formidable barriers. Yet, Rudolfo and Christina were each articulate about wanting to complete their educations and get good jobs, and also about where they each stepped off the track that, with one more year of high school that would have led to their high school graduation. The family homeless shelter where they landed offered them a safe place to begin their family life together with their baby, as long as they followed the shelter's curfew and other rules and worked diligently toward pursuing jobs and other requirements. Their credentialed coach Sympa Crima gave them some "straight talk" about what it would take to get their own apartment and overcome these barriers, moving forward toward their dreams. Three family development methods stand out in his repertoire of methods: cultural competence, focusing on strengths, and having the clients set their own goals—then following up step-by-step.

To Rudolfo and Christina, their relationship with this homeless shelter and their worker Sympa Crima represented a chance to live together as a family for the first time, to bond with their baby and each other, and to articulate and pursue their goals. Instead of being afraid in the homeless shelter, as many people might be, they were relieved to be together and away from the violence of Christina's family. When they complained about not being able to cook in the shelter, Sympa Crima helped them use that desire as fuel toward getting their own apartment. Sympa Crima's cultural competence appears to be a key to his ability to work well with this young

couple, along with his ability to comply with the system's demands, while also keeping the focus on the clients' own goals.

Sympa Crima reflected on his ongoing work of transforming government policies:

When you work for the government, you have rules and regulations. No worker can change the rules immediately. When you have chance, you can meet with the decision makers, you can express what you think.

Chapter 7: Conclusions

The present study demonstrated that the ability of mothers to set and pursue goals for a better life was initially limited by lack of education and work experience, domestic and community violence, physical and mental health problems, drug use by family members, and challenges of helping their children or grandchildren heal from sexual abuse. This finding confirms and extends research by others (Ehrenreich, 2001; Kalil et al., 1998; Loprest, 1999; Loprest & Zedlewski, 2002; Rubin, 1994; Tweedie, 2002). In addition, this study demonstrated that in the rural site, parents' job and educational opportunities were limited by lack of transportation.

This study illustrated the formidable barriers and challenges these mothers encountered as they pursued goals that included financial stability, getting their children tested for Attention Deficit Hyperactivity Disorder (ADHD), and pursuing legal action and counseling related to child sexual abuse from relatives and neighbors. The study demonstrated that the relationship between family and credentialed coach can help the family overcome formidable challenges and barriers. It also demonstrated that to help these mothers overcome barriers and challenges, credentialed coaches in the study used the following abilities learned in the Family Development course (Forest, 2003): an accepting attitude; a wealth of information on available services; the ability to form and sustain a mutually respectful relationship, and to help mothers articulate their own goals and the steps needed to pursue them; excellent communication skills, along with a willingness to provide information and encouragement, and to research mothers' questions, when necessary, in order to

provide meaningful answers; the ability to distinguish what was important; and an openness to new ideas.

This study also illustrated the negative effects of poverty on the lives of adults and children over the course of their lives. Many of these effects had intertwining roots and effects in both the personal and the societal—for example, State and Federal policies such as TANF’s unwillingness to pay for college tuition and related child-care expenses. The study also showed that environmental factors, such as limited transportation and resulting isolation, exacerbated the adverse consequences of poverty for many rural mothers. In some instances, these factors in turn led to violence and, in one case, intended suicide/child murder.

This study found that a relationship with a credentialed coach reduced the chaos that Evans (2004, 2006) found is a cause of poorer outcomes of children living in poverty. The mitigating mechanism appears to have been the frequent goal-oriented meetings coaches held with mothers to help them create order and set and move toward their goals. The study also demonstrated that unexpected settings, such as a New York City homeless shelter, can mitigate chaos when a credentialed worker is present. Mothers and their respective coaches found their relationship meaningful, significant, and empowering. In each case, this relationship empowered the mother by contributing to her improved self-perception, a factor that was instrumental in altering her relations with immediate and extended family members, as well as with others in the wider community, such as employers and landlords. Such empowerment in turn led some mothers to voluntarily gather more information than they needed solely for the betterment of their own (and their family’s) lives, so that they could get involved

with their communities and community organizations (e.g., with their children's schools). These positive results stand in marked contrast to these mothers' prior worldviews, which had been unwittingly, profoundly constrained by Federal policies such as TANF's focus on merely getting a job—any job, no matter how ill-suited to the individual—and the lack of college tuition benefits, including child care.

Furthermore, as demonstrated in this study, the ability of these mothers to set and pursue goals for a better life was initially limited by lack of education and work experience, domestic and community violence, physical and mental health problems, drug use by family members, and in several cases, the challenges of helping their children or grandchildren heal from sexual abuse. This finding confirms and extends research by others (Ehrenreich, 2001; Kalil et al., 1998; Loprest, 1999; Loprest & Zedlewski, 2002; Rubin, 1994; Tweedie, 2002).

Analysis of Profile Pairs

What can be learned from analysis of these eight profile pairs? It is important to analyze what can be learned from the narratives of mothers and FDC coaches about the kinds of barriers and challenges mothers encounter as they set and work toward goals, and the methods coaches use to help them overcome these barriers and challenges. It is also necessary to consider how mothers and FDC coaches perceive the meaning and significance of their relationship and their experience in working together, and what aspects of the coach-mother relationship empower mothers to set and pursue goals for a better life for themselves and their children.

This analysis initially uses the conceptual frameworks of Human Ecology (including its progeny, chaos theory) and Parental Empowerment to consider these

questions, then—when data from the study point out phenomena inadequately explained by either framework—considers the profile pairs in this study through the subsequent lens of transformative learning. The profile pairs are considered here in the same order as they were initially presented in Chapter 6.

Jessica (Mother) and Sue (Coach)

The profile pair of Jessica and Sue vividly portrays the formidable barriers and challenges Jessica encountered as she pursued her goals of a strong marriage, greater financial stability, and caring well for her children, including her exceptionally busy young son. On a daily basis, Jessica faced managing her family on an irregular income, the relentless stress of living with an apparently hyperactive child, and job opportunities limited both by the rural location and her own and her husband's limited education. The story that Jessica did not tell, but which Sue did, was of the too-stressful day that ended in someone (perhaps even Jessica or her husband) calling Child Protective Services (CPS). Jessica told the researcher only that she and her husband had been arguing, so she realized they needed some help, and that "Amy at the Department of Social Services suggested Sue." Sue described the incident more fully: "An incident was reported, and the CPS report was founded because the children were in the home, sleeping. The mom got angry and hit a glass window in a china cabinet."

This incongruity between Jessica's and Sue's description of the same incident is significant, particularly when combined with the fact that they nevertheless developed a mutually respectful and productive relationship. It is worth noting that Jessica and several other mothers interviewed by the researcher praised their

credentialed coach for not being judgmental. Jessica contrasted the nonjudgmental behavior of her coach to her children's schoolteachers, whom she said considered her and her husband too young to be parents.

Overcoming Barriers

What methods did Sue use to help Jessica overcome barriers and challenges? She appears to have followed the steps she learned in the Family Development course (see page 11). Although they met under the challenging circumstance of a founded child-protection case, Jessica credited Sue for her accepting attitude and wealth of information. Sue formed a mutually respectful relationship with Jessica, helped her articulate her own goals and the steps she needed to take in order to reach them, and provided information and encouragement. Clearly, Sue had excellent communication skills and the ability to distinguish what was important—such as getting Bobby tested for ADHD—from less important issues such as laundry piled on the couch. When Jessica suggested unusual goals, such as encouraging her husband to pursue deep-sea welding, Sue refrained from imposing more conventional views. When Sue lacked an immediate answer to Jessica's questions, she would seek out more information; only after she had found the information needed would she give Jessica an answer.

For Jessica, Sue's arrival in her family's life brought stability in the face of chaos, and encouragement in an environment in which few people believed in this family. Clearly, the family's relationship with Sue has had positive meaning and significance, in much the same way as would an older, more experienced, and knowledgeable sister or friend, but without the negative aspects that clouded Jessica's own family relationships.

When Sue met this family as the result of a founded CPS investigation, it would have been easy to take a punitive stance, but instead she used an empowerment approach to help the family use their strengths to accomplish their goals. In addition to the concrete steps toward helping Jessica reach her goals, including the aforementioned testing and subsequent preschool referral for her “very busy” young son, Sue also recognized the importance of Jessica being able to take care of herself, even as she cared for her challenging family. Furthermore, a future CPS incident would be less likely. To this end, Sue advised Jessica to take time for herself when possible. Even a walk or hot bath could reduce her stress.

This profile pair demonstrated that the relationship between family and credentialed coach can help the family overcome formidable challenges and barriers. It also showed the ways in which both mother and coach found this relationship meaningful and significant, and how this relationship empowered the mother. Let us return to Cochran’s (1988) definition of parental empowerment:

We propose that positive changes in self-perception (Stage I) permit the alteration of relations with members of the household or immediate family (Stage II), which is followed by the establishment and maintenance of new relations with more distant relatives and friends (Stage III). Stage IV is seen as information gathering related to broader community involvement, followed in Stage V by change-oriented community action. (p. 164)

Through her work with Sue, Jessica’s self-perception changed from a former abused child and foster child to a dedicated young wife and mother, proud of having held her marriage together despite predictions of failure. This altered self-perception, together with her positive relationship with Sue, appeared instrumental in Jessica’s altered relationship with her husband, in which Jessica convinced him to allow their son to be

tested for ADHD. This altered self-perception may also have been a factor in Jessica's ability to form a positive relationship with her husband's employer and his wife, as well as healing her strained relationship with her own father. Sue helped Jessica gather "information related to broader community involvement," such as that with her children's school—despite her sense of teachers' initial perceptions that she and her husband were too young to be good parents. Although Jessica laughed over the fact that she would toss loads of laundry off the couch when Sue arrived, Jessica's off-handed comment contained a much bigger reality: this family not only had a couch and laundry facilities, but also a reliable home; a stay-at-home mom; an involved, employed dad who came home every night; transportation; and a routine that included doing laundry, caring for their four busy boys, and (presumably) providing and preparing food for their six-person family.

Had their "very busy" youngster already been enrolled in preschool—thus providing Jessica with some respite from her isolated, challenging daily life—this stressed-out mom might have been less likely to lose her temper after the children were asleep, breaking a window in a china cabinet. That single act precipitated Sue's welcome visits and the ADHD testing Jessica needed, but also a "founded" designation from CPS, which meant that Jessica would be unlikely to ever get her old job back. Good employment opportunities such as a state job working with developmentally disabled adults (and which would probably carry health insurance and retirement benefits) are rare in an isolated rural area. As Sue summarized, "That closes a lot of her job possibilities."

Without the black mark on her record, in a few years when the youngest child entered school, Jessica could have returned to her former job or possibly pursued her dreams of going to college. As it stood at the conclusion of this study, there was little incentive for Jessica and Jerry to limit the future size of their family. Without the pull of returning to her job, or a realistic possibility of completing college (which she expressed a wish to do), or a history of limiting the size of their family, Jessica, like many young mothers living in poverty, might magnify her isolation and financial challenges by drifting into having more babies.

Jessica's worldview is circumscribed by the rural region in which she lives, yet she is profoundly limited by Federal policies. Had Jessica lived a quarter century earlier, during the AFCD era, she would likely have been eligible for college tuition benefits and associated child-care programs. In other words, her dreams of a college education could have come to fruition. Today, TANF, the federal program that replaced the AFCD, has replaced a focus on education with a focus on getting a job—any job.

The Effects of Chaos

This study sheds light on Evans' (2004, 2006) finding that chaos is a cause of poorer outcomes of children living in poverty by illustrating that a relationship with a credentialed coach, who frequently has goal-oriented meetings with mothers living in poverty, appears to mitigate such chaos by helping the mothers set and stay focused on their goals. While Garbarino's social toxicity theory described some elements similar to Evans' description of chaos, such as substandard housing and parental absence, Evans' research focused specifically on the disorder often found in the environments

of people living in poverty. This researcher is not referring here to the messiness that households with children can routinely expect, such as toys out of place, occasional late bedtimes, sticky tables, and increased expenses. *Chaos* in this context refers to the absence of workable household routines; profoundly unhealthy or continually disrupted relationships; housing that is unsafe, noisy, or crowded; food insecurity, drug addiction; violence; frequent moves that affect children's schooling; and/or the lack of appropriate supervision that unwittingly invites child molestation.

Chaos' hallmark is that it overwhelms those who experience it, often through the accumulation of multiple conditions or events. All of the eight profile pairs offer examples of the mother-coach relationship fostering order where chaos previously reigned, which helped the mother create order and set and move toward her goals.

What can we learn from about poverty-related chaos and its reduction through a relationship with a credentialed coach? This study's presentation of the Jessica and Sue profile pair was subtitled "Always Chaos!" This subtitle was drawn directly from Jessica's own description of her life. Jessica's examples ranged from the dangerous chaos that brought Child Protective Services to their home in the wake of an argument, to the more benign chaos of clean, unfolded laundry piling up on the coach.

Prior to Sue's entry into this family's life, Jessica was no stranger to chaos. At age twelve her boyfriend Jerry's foster mother called CPS after noticing Jessica's swollen face, which was caused by her stepfather hitting her. Jessica was taken into protective foster care, but never lost touch with Jerry, and eventually married him.

Jessica and Jerry's early married life was strained by chaotic work schedules induced both by being parents of four young children, and by job options limited by

low education and their rural location. Jessica reported, “The first couple of years [after we had children], I worked 4:00 p.m. to midnight; then, when our oldest started kindergarten, I switched to part-time during the day.” Meanwhile, her husband Jerry worked a night shift.

This grueling schedule worked for a while, but once the children started school and sports, “it was just too much,” so Jessica quit her job as soon as Jerry landed a day job. Formerly, he had cared for the children while Jessica worked. The chaos of staying home with four busy children was exacerbated by patterns the children developed during the years Jerry cared for them. “Our kids were used to having him home all the time. It was just chaos.” We should keep in mind that Jerry was caring for the children after a long night shift at his welding job, and therefore may have been too sleepy to provide consistent routines. When Sue began working with the family, as she said, “it ... just kind of calmed it down.”

Through Sue’s visits and the services with which she connected this family, including ADHD testing for their son Bobby, Jessica experienced a big “Aha!” moment, which clearly illuminated her family’s chaos. She realized that Bobby’s ADHD had been running the household. The ADHD testing and subsequent plan for working constructively with Bobby’s behavior began to curb that chaos.

Brenda (Great-Grandmother) and Julia (Coach)

Chaos was also a factor in the profile pair of Brenda and Julia. As Brenda said, “I didn’t want [my great-grandchildren] in foster care.” Until Brenda realized that her great-grandchildren were in danger in the California “drug capitol of the world,” as she put it, her life seemed to revolve around simple family pleasures. She and her

retired husband enjoyed an “old school” life in upstate New York. Parents and grandparents seemed to be benignly in charge, children went to school, and the whole family enjoyed visits to their simple camp. However, Brenda’s apparently pastoral life changed abruptly when her daughter Lori called her from California to say that her children were about to be placed in foster care. Brenda discovered that the children were being abused by Lori’s apparently drug-addicted boyfriend. In an attempt to stem that danger, Brenda consulted a paralegal, flew to California, confronted the California CPS system, and drove home, across the country, in a rental car with the children and Lori, who “detoxed” en route.

As Brenda told her story to the researcher, it came to light that these children were Lori’s grandchildren who had come into her care years earlier when Lori’s daughter Sally could not adequately care for them. Thus, it became clear that despite Brenda’s picture of a normal life, including happy times at the lakefront camp, the roots of this family’s problems were long-standing. In Lori and perhaps Sally’s generation, this dangerous unpredictability was exacerbated by divorce and drug addiction, which included marijuana and cocaine. In this chaotic environment, Lori’s boyfriend, Dan, sexually molested four-year-old Ally, manipulated Lori, and contributed to the children becoming “drug babies.”

What can we learn from this profile pair about chaos and its mitigation through a relationship with a credentialed coach? First, chaos and its roots exist not only in cities such as the California “drug capitol of the world,” but also in rural regions. In addition, we see that trauma, and perhaps drug-induced developmental delays, lasted

beyond Brenda's initial rescue, affecting the children's—particularly Ally's—ability to settle into school and function normally at home.

We also see the ways Brenda's relationship with credentialed coach Julia helped Brenda not only gain positive control in her own and her great-grandchildren's lives, but also, ultimately, re-parent Lori. According to Brenda, "When we got the kids, (Julia) came out to the house and talked to us and started setting up programs and counseling, things like that, which was a big help. ... She listened to what I had to say and gave me the support that I needed because there was days when I first got them that I just felt like screaming because I didn't know how to control what they were doing and what to do to correct it." With Julia's coaching and support, Brenda was able to stabilize her great-grandchildren's lives as well as help Lori recover from drugs and get her own life in order, so she could resume parenting the children, albeit in a safe, orderly manner, and without the effects of drug abuse. Brenda plans to remain in their lives, but in a grandmotherly role, not as primary caregiver.

Dorothy (Mother) and Jill (Coach)

We can also learn about chaos and its mitigation from the rural profile pair of Dorothy and Jill, subtitled "The Problems Kind of Tumbled-Weeded." This subtitle, drawn from Dorothy's own description of her life, metaphorically describes the swirling chaotic instability Dorothy experienced before Jill helped her regain control. A tumbleweed is a dried desert plant that blows across the arid land in whatever direction the wind blows, becoming bigger as it tumbles along and becomes enmeshed with thorns of the thistles it encounters. Such a description can seem poetic, yet there was nothing poetic about Dorothy's life. The mental chaos she experienced in her

isolated trailer home with her three children prompted her to make plans to end all their lives.

What can we learn about chaos and its mitigation from this profile pair? First, we vividly see the connection between mental chaos and the directionlessness of Dorothy and her children's lives. It is difficult, and perhaps ultimately unnecessary, to determine the directionality of this chaos. Did Dorothy break down mentally because she lost her life's anchor, or did her life become anchorless because she snapped mentally? Dorothy told the researcher that the day she decided to asphyxiate herself and her children, her husband "had just left to drive truck." One wonders whether his presence had been the anchor that kept Dorothy able to handle the overwhelming problems in her muddled life; without him being home each night, perhaps the chaos overwhelmed both her own mind and the family's daily life.

One also wonders whether prior to the birth of her third child, who was born with serious medical problems, Dorothy was anchored by her good job as a receptionist and its regular paycheck, which she lost when she missed too much work time caring for Jimmy in the hospital. Through the lens of human ecology, specifically the macrosystem, one wonders why federal policies did not prevent Dorothy's job loss and subsequent plummet into chaos and poverty? Why was her job not protected by the Federal Family and Medical Leave Act, which requires employees of covered employers to grant up to a total of 12 weeks of unpaid leave to care for an immediate family member (spouse, child, or parent) with a serious health condition (U.S. Department of Labor, 2009).

In a short time, Dorothy was catapulted from employed mother of two children to unemployed mother of three children, one of which required constant nursing. “There was no money,” Dorothy reported. Dorothy’s husband took a trucking job driving long distances, so Dorothy was alone with her children for long stretches of time. Did this isolation prompt Dorothy to come unglued? Or was it the creeping mold in the trailer, with its relentlessly toxic physical chaos. Despite all these compounded problems, Dorothy’s credentialed coach Jill pinpointed the perception that Dorothy’s parents-in-law molested her son, and the founded case of a neighbor molesting her daughter, as the primary causes of Dorothy’s mental chaos.

What can be learned about the methods Dorothy’s credentialed worker Jill used to promote order in the overwhelming chaos of her Dorothy’s life? Jill described herself as “a rock” and stressed the importance of keeping a “mental clear” for her clients. Her seemingly simple methods included bringing Dorothy a calendar to help her establish a regular schedule for herself and her children. Dorothy reflected, “Jill helped me give my kids a routine. (Before) I just woke up (with no plan for the day) , but then Jill got me a calendar. Now I am remembering things. The kids know Tuesday’s the day Jill comes. It just gives a little more [structure].” Jill also helped Dorothy set and reach goals, which protected Dorothy and her children somewhat from being buffeted by life’s chaos. “Every time Jill comes, we go over my goals.”

Lynn (Mother) and Mercedes (Coach)

Chaos was also a factor in Lynn’s life. What can be learned about chaos and its mitigation in the profile pair of Lynn and Mercedes? The subtitle of this profile pair, “Now That I’m Away From Him I Can Focus,” offers a valuable clue to the answer.

Lynn was about to give birth to a baby conceived with a drug-addicted man whose chaos permeated her life. Eventually, she realized she would never reach her goals while she remained with him. She left him when she discovered she was pregnant, but at the cost of becoming homeless, which brought a new kind of chaos into her life. During Lynn's interview, she was in urgent need of a home, as well as medical transport for her impending trip to the hospital. Despite Lynn's intelligence and ambition to create a better life, homelessness and poverty produced a level of unpredictability in her life and her children's.

Lynn's relationship with credentialed coach Mercedes mitigated this problem in two ways. First, it provided the gateway to urgently needed, reliable medical transportation and care, as well as possible access to an affordable home in which she could reunite her children and establish a predictable routine. Mercedes also helped Lynn maintain a future-goal orientation amidst her chaos, keeping alive her plan to eventually go to college.

In this profile pair, like that of Brenda and Julia, we learn more about how a family member's drug addiction could unleash multigenerational chaos throughout the family. We then see how a relationship with a credentialed coach mitigated this chaos by fostering current safety and future-goal orientation.

Godfrey (Uncle) and Ekemini (Coach)

In the profile pair of Godfrey and Ekemini, we see that when chaos enters a family's life through one member, in this case a runaway teenager who had disappeared into the dangerous drug-permeated street scene. We learn how Ekemini used tact—not the punitive stance one might expect—to discover the teenager's

whereabouts nearby and attract him into a mutually respectful working relationship with her and his own family. This profile pair illustrates how committed, well-organized family members, under the guidance of a credentialed coach, can work together to overcome dangerous chaos.

Mary (Grandmother) and Ms. Tracey (Coach)

In previous profile pairs, both drug use and unpredictability were factors in producing this family's chaos, and a relationship with a credentialed coach was helpful in reducing it. Chaos was a major influence in the problems that brought Mary into a relationship with Ms. Tracey. As in other profile pairs, drug abuse was a factor. Mary discovered that her daughter had left Mary's grandson Mark in a dangerously chaotic living situation with no adult supervision and scant food. Mary gave up her long-standing position as a live-in housekeeper to raise Mark. Lack of a job, combined with the expenses and strain of raising her grandson, who brought with him the chaotic patterns which had ruled the only life he had known, brought chaos into Mary's previously well-organized life. Taking Mark plummeted Mary into financial, emotional, and marital chaos. Yet Mary persevered. She went to court to get custody of Mark, explaining that she wanted to create a loving, orderly life for him: "Because I love him and ... need him to go to church, and school, to grow up the proper way." In this profile pair, we learn that rescuing a child from a chaotic environment can reduce a grandparent's stable life to chaos. We learn that for some families living in poverty, one decision can turn a reasonably stable life into far-reaching chaos. We also learn that even when the chaos is so extreme that a family is ready to give up, a relationship with a credentialed coach can help turn their lives around.

Haja (Mother) and Ms. Doumbia (Coach)

The stench of war-torn chaos permeated the opening story of the profile pair of Haja and Ms. Doumbia. As Haja and her daughters narrowly escaped their war-torn African homeland, even the most basic chaos containers that we take for granted in the United States, the morgue and the police, had broken down. Haja and her children encountered dogs eating human bodies in the street as they fled. After escaping, Haja spent more than a year killing snakes and scorpions in the wasteland to which refugees were sent. Haja eventually reunited with her husband, who was living in Harlem.

What can we learn about chaos and its mitigation from Haja's story, and that of her credentialed coach Ms. Doumbia? First, this story puts into perspective the chaos encountered in the other narratives in this study. Haja's gruesome experiences prompted her to conclude that "The police in Harlem do a very, very, good job." After experiencing civil war and related strife in her homeland, Haja was grateful to know that if she called 9-1-1, a police officer was likely to respond with help. To Haja, 9-1-1 represented a powerful anecdote to the unbridled chaos she experienced back home. Haja commented, "When I hear people here complaining, I say, 'You haven't seen anything.'"

As with the profile pair featuring Dorothy and Jill, we learn that traumatic experiences can have lasting chaotic effects on the person's mind, as in the case of the post-traumatic flashbacks Haja continued to experience, long after emigrating from her homeland. We also learn how a relationship with a credentialed coach can mitigate even such extreme chaos as Haja experienced. Setting and working toward goals with Ms. Doumbia—including the goal of creating a written legacy of her experiences—

helped Haja move forward and heal. From this profile pair, we learn that by encouraging the mother to set and pursue her own goals, and then listening supportively and arranging connections with appropriate services, a credentialed worker can help even a deeply traumatized mother recover from chaos.

Christina (Mother), Rudolfo (Father), and Sympa Crima (Coach)

The final profile pair, subtitled “Starting Family Life in a Homeless Shelter,” also offers lessons on chaos and its reduction through a relationship with a credentialed coach. What can we learn on this subject from this profile pair? When Christina’s father attacked her baby’s father Rudolfo with a kitchen knife, Christina fled the violent chaos with her infant. The young family landed in a homeless shelter where they began their family life under the guidance of credentialed coach Sympa Crima.

This profile pair demonstrates that like Haja’s perception of the Harlem police, a homeless shelter, although not often considered a peaceful or desirable residence, can offer a positive setting for mitigating chaos. We learn how credentialed coach Sympa Crima combined the New York City Homeless Services requirements with his own remarkable cultural competence to establish a positive, orderly influence on this young couple’s decision making. We also learn that, despite experiencing violent chaos, a family can use the influence of a skilled credentialed coach to build toward a healthy future.

Human Ecology

It is worth viewing the question of chaos in these profile pairs through the lens of one of the study’s initial conceptual frameworks—human ecology. While each of

the mothers in all eight profile pairs focused on what she did personally to stem the tide of the chaos in her family's life, larger social, economic, and environmental forces are at play here as well. Bronfenbrenner (1979) labeled the contexts in which children and adults develop as extending from the immediate setting, which he termed the "microsystem" (p. 7), out through the "mesosystem" (p. 209), "exosystem" (p. 237), and "macrosystem" (p. 238). Although Jessica certainly did not use these terms or think in this way, her children were profoundly affected by the macrosystem (e.g., economic policies) that expected both parents of young children to be in the work force, and exosystem (e.g., the workplace of the child's parent).

According to Bronfenbrenner's theory, "proximal processes"—repeated, enduring interactions—shape human development. In several of these profile pairs, we have seen the effectiveness of proximal processes undermined by work-related limitations at the exosystem level, such as Dorothy's husband's truck-driving job that required his continual absence, or the CPS record expected to undermine Jessica's future work opportunities.

At the macrosystem level, the researcher wonders how Jessica's family's life might be improved if U.S. economic policies would enable one parent in families with young children to stay home to establish positive patterns through consistent proximal processes. In the Jessica-Sue profile pair, we see how without this kind of federal policy, poverty can interfere with healthy proximal processes because of inadequate parental time and money.

Each of the rural profile pairs shows how the lack of services in a rural area further constrains a family's options. Had Jessica and Jerry lived in a more populated

area, they would have been more likely to have been offered the local version of Bronfenbrenner's legacy, the Head Start program, which he designed to counteract the growing chaos of family life.

Also at the macrosystem level, federal TANF policies prevented Lynn from accessing the type of educational services that would have enabled her to complete her dreams of college under a previous era's federal welfare policy. Had she been able to complete college, Lynn's chances of escaping a life of continual chaos would have been improved by a higher income.

Transformative Learning

What have we learned from this study about transformative learning in U.S. women living in poverty? First, analysis of the profile pairs in this study demonstrated that transformative learning occurred for all these mothers. In each case, a relationship with a credentialed coach fostered this learning. This finding alone makes a significant contribution to the literature on transformative learning, because the vast population of U.S. women living in poverty has thus far received relatively little attention.

Mezirow's initial research studied women returning to college, and the extensive literature on transformative learning that has emerged since has paid scant attention to this population.

Most mothers in this study experienced a disorienting dilemma, as described by Mezirow (1991). Then, through the supportive critical discourse with their credentialed coach, they learned to better understand their own psychologically or culturally limiting patterns, so that instead of repeating such patterns, they could consciously move toward their goals. Critically reflective dialogue with a credentialed

coach appears to have been an important step in this transformative learning. This finding supports the criticism of Mezirow's theory by Collard and Law (1989), who considered Mezirow's theory flawed because it focused on individual transformation and "lacked a coherent, comprehensive theory of social change" (p. 102). They believed that individual transformation could not occur without concurrent attention to cultural and social issues. Several profile pairs in this study show transformative learning simultaneously as individual and societal processes.

This study demonstrated that a relationship with a credentialed coach provides the opportunity and support needed for these mothers to participate effectively in the type of discourse Belenky and Stanton (2000) claimed is unlikely in "hungry, homeless, desperate, threatened, sick, frightened adults" who are "less likely to be able to participate effectively in discourse to help us [*sic*] better understand the meaning of our own experiences" (p. 73). The study offers several examples showing that relationships between credentialed family workers and mothers living in poverty offer an opportunity for these mothers to learn these preliminary steps: "developing their capacities for articulating and critiquing the underlying assumptions of their own thinking ... [and] the thinking of others, ... [as well as] the kind of reflexive discourse that Mezirow prescribes." (Belenky and Stanton (2000, p. 74.) In short, the mother-coach relationship appears to help women find their voice in the discourse necessary for perspective transformation to occur. This study offers numerous examples of women participating effectively in a discourse designed to help themselves "understand the meaning of (their) own experiences" (Belenky & Stanton, 2000, p.74), and then going on to take both personal and societal action. This study suggests that

credentialed coaches' ability to engage mothers in critical reflection on their own heretofore unexamined assumptions—a step Belenky and Stanton considered a missing aspect of transformative learning in many women—may be an important reason why the relationship between low-income mothers and FDC coaches helps mothers living in poverty to overcome barriers.

Summary

This study examined how 25 randomly selected rural and urban mothers living in poverty in the United States and their ten Cornell-credentialed coaches used the Family Development Credential process to identify, address, and resolve societal and personal barriers to mother and family self-reliance. The study looked at (1) the barriers mothers encountered and the methods they and their coaches used to overcome them, (2) how the mothers and their coaches perceived the meaning and significance of their relationship, and (3) aspects of the mother-coach relationship that empowered mothers to pursue their own goals for a better life for themselves and their families. The researcher developed data from separate mother/coach interviews into “practitioner profiles,” then combined these interviews into “profile pairs,” using a new methodological approach emerging from this study.

Initially, mothers' ability to set and pursue their goals was limited by personal and environmental factors, including chaos. The study found that the mother-coach relationship appeared to significantly reduce these barriers. One mechanism for this reduction appears to have been supportive critically reflective dialogue between mothers and coaches, which in turn appears to have been associated with mothers' own goal-oriented transformative learning. The conclusion of this researcher is that

such transformative learning appears to have been clearly precipitated by the intervention and under the guidance of family workers skilled in the methods of the Family Development Credential.

To summarize, this study demonstrated that the ability of mothers to set and pursue goals for a better life was initially limited by lack of education and work experience, domestic and community violence, physical and mental health problems, drug use by family members, and challenges of helping their children or grandchildren heal from sexual abuse. This finding confirms and extends research by others (Ehrenreich, 2001; Kalil et al., 1998; Loprest, 1999; Loprest & Zedlewski, 2002; Rubin, 1994; Tweedie, 2002). These limitations are the basis, the rationale, for the FDC program.

The Profile Pairs showed that the relationship with a credentialed coach can help mothers overcome these formidable challenges and barriers as they set and pursued goals that included financial stability, getting their children tested for Attention Deficit Hyperactivity Disorder (ADHD), pursuing legal action and counseling related to child sexual abuse from relatives and neighbors. Consistent with the ecological perspective on human development, mothers and coaches described environmental factors such as limited transportation and resulting isolation that exacerbated adverse consequences of poverty for many rural mothers, including parents' job and educational opportunities.

Also consistent with the ecology of human development, the stories told by study participants illustrated that many of the negative effects of poverty on the lives of adults and children had intertwining roots and effects in both the personal and the

societal, for example, State and Federal policies such as TANF's unwillingness to pay for college tuition and related child care expenses.

Accounts of mothers and coaches converged to demonstrate that to help these mothers overcome barriers and challenges, credentialed coaches in the study used the following skills learned in the Family Development course (Forest, 2003): accepting attitude, wealth of information on available services, ability to form and sustain a mutually respectful relationship, ability to help mothers articulate their own goals and the steps needed to pursue them, provided information and encouragement, excellent communication skills, ability to distinguish what was important, openness to new ideas, responsiveness to mothers' questions by searching out more information, then getting back to mother.

Evans (2004, 2006) has attributed many of poorer outcomes of children living in poverty to chaos, which the study found can be reduced by a relationship with a credentialed coach. The mitigating mechanism appears to be the frequent goal-oriented meetings coaches hold with mothers to help them create order and set and move toward their goals. The study also demonstrated that unexpected settings, such as a New York City homeless shelter, can mitigate chaos when a credentialed worker is present.

In their interviews, both mothers and coaches described their relationships as meaningful, significant, and empowering. The relationship with a coach empowered the mothers by contributing to their improved self perception, which was instrumental in their altered relations with immediate and extended family, and others in the wider community such as employers and landlords. This in turn encouraged some mothers to

gather information that led to more community involvement, such as with children's schools. Mothers' worldviews and their options were profoundly constrained by Federal policies such as TANF's focus on getting a job—any job, and lack of college tuition benefits including child care.

Recommendations

The following actions are recommended based on findings from this study:

1. Update the FDC curriculum to add new sections on:
 - Chaos
 - Transformative learning
 - More explicit critical reflection tools
2. Design and develop a funding proposal for a study investigating the role of critical reflection skills and transformative learning in mothers living in poverty, and perhaps other populations, to overcome barriers in their lives. The feasibility of such a study is increased by Cornell's FDC program's affiliation with FDC programs in nearly half the states in the nation.

APPENDIX

Informed Consent Letter

The Cornell Empowering Families Project invites you to be part of some important research. I am asking families and credentialed family workers to talk with me about your work together. I'm talking with people from various cultural backgrounds, in New York City and in a rural area. I would like to talk with you for about an hour, and tape record our talk. A confidential transcriptionist will transcribe (type out) the tape, then I will send you the transcript to make sure it's accurate.

Protecting your privacy is important to me and to Cornell, so please chose a "pseudonym" (fake name) that is comfortable in your cultural background. I will use this on the tape and transcript. To send you your transcript I will also need your real name, address, phone number. All research records will be kept private, in a locked file cabinet. Audiotapes will be erased once the study is finished. In any sort of report I might publish, I will not include any information that will make it possible to identify you.

Cornell requires researchers to say whether there are any risks involved. I do not anticipate any risks for you participating in this study, other than those encountered in day-to-day life. Being part of this study will take about two hours of your time including our talk, going over the transcript, and sending me any corrections. Once you complete these three steps and send back a signed voucher Cornell will send you a check for \$50 as a way of saying "thank you". You will also have the satisfaction of contributing to scientific knowledge. It is completely your choice about whether to be part of this study. Saying "yes" or "no" has no effect on any services you might receive, or on workers' jobs. If you decide to quit the study at any time, you will still have my respect, and we will still keep your information private. If you have questions before deciding whether to participate, or during or after the study, you can reach me at cn3@cornell.edu or (607) 255-2531. If you have questions about your rights as a person participating in this study, you may contact the Cornell University Committee on Human Subjects (UCHS) at 607-255-5138, or <http://www.osp.cornell.edu/Compliance/UCHS/homepageUCHS.htm>. You will be given a copy of this form to keep for your records.

Thank you,
Claire Forest
Lead Researcher & Director, Cornell Family Development Credential

Statement of Consent: I have read the above information, and have received answers to any questions I asked. I consent to participate in the study. I agree to allow the interview to be tape-recorded and transcribed (typed out) with all identifying information removed. I will receive a copy of the transcript within one month for my review and comment.

Name _____
Signature _____ Date _____
Address/ phone _____

This consent form was approved by the UCHS on May 25, 2005

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